

# Financial Planning

## Expense Worksheet

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Housing	Monthly	Annual
Mortgage		
Condo Fees/Association Fee		
Electricity/Gas		
Water		
Garbage Removal		
Telephone/Personal Computer		
Cable/Satellite TV/Internet		
Security System		
Pool Service		
Lawn Service		
Maid Service		
Maintenance/ Improvements		
Property Taxes		
Pest/Bug Service		
Home Owners Insurance/Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Child Care	Monthly	Annual
Support Payments		
Daycare/Education		
Sports Activities		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Transportation	Monthly	Annual
Loan/Lease Payment #1		
Loan/Lease Payment #2		
Loan/Lease Payment #3		
Gasoline		
Maintenance/Improvements		
Registration/Inspection/Excise Tax		
Auto Insurance		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Groceries	Monthly	Annual
Food/Beverages		
Household Supplies		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>

Clothing	Monthly	Annual
Adult #1		
Adult #2		
Children		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Furnishings	Monthly	Annual
Inside/Outside		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Personal Care and Cash	Monthly	Annual
Dry Cleaning		
Hair/Nails/Facials		
Cosmetics/Shoe Shine		
Massage		
Health Club		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Medical/Dental/Vision	Monthly	Annual
Co-Pays / Deductibles		
Prescriptions / Health Care Costs		
Vitamins		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Education/Self Improvement	Monthly	Annual
Private School / College		
Classes / Books / Paper		
Association Fees / Subscriptions		
Hobbies / Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Installment Debt Payments	Monthly	Annual
Student Loans		
Credit Cards		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Professional Services	Monthly	Annual
Financial Planner		
Accountant		
Attorney		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>

Entertainment	Monthly	Annual
Dining Out		
Sports Tickets		
Theater Tickets		
Recreation / Hobbies		
Movies / Videos		
Club Membership Fees		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Vacations and Holiday		
Travel Tickets		
Hotels		
Food		
Entertainment		
Auto		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Charitable Contributions		
Favorite Charity		
Cash Donations		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>

Gifts	Monthly	Annual
Holidays		
Birthdays		
Weddings		
Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Pets	Monthly	Annual
Food		
Veterinarian		
Pet Insurance/Other		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>
Miscellaneous		
Support/Alimony		
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>

