

Date: _____

Monthly Living Expenses Worksheet

Client A: _____

Client B: _____

Annual Pay Periods: _____

Annual Pay Periods: _____

Housing	
HOA Dues	_____
Furnishings	_____
Improvements	_____
Insurance	_____
Maintenance	_____
Mortgage / Rent	_____
RE Taxes	_____
Telephone / Cell	_____
Utilities	_____
Domestic Help	_____
Yard / Pool	_____
Second Home	_____ <small>*Separate Worksheet</small>
Total \$	_____

Transportation	
Gas / Tires	_____
Insurance	_____
Repair / Oil Change	_____
Wash / Parking	_____
Loan Payments	_____
Lease Payments	_____
DMV Fees	_____
Rideshare / Public	_____
Total \$	_____

Miscellaneous	
Bank Fees	_____
Safety Deposit Box	_____
Professional Dues	_____
Student Loan	_____
Financial Advisor	_____
Tax Preparation	_____
Postage / Stamps	_____
Gifts	_____
Pet Care	_____
Other	_____
Total \$	_____

Children	
Allowance	_____
Babysitter	_____
Camp	_____
Child Care	_____
Clothing	_____
Education	_____
Sports	_____
Lunches	_____
Other	_____
Total \$	_____

Monthly Savings	
Cash Reserve	_____
Regular Savings	_____
401(k)	_____
Traditional IRA	_____
Roth IRA	_____
SEP / SIMPLE	_____
TSA / 403(b)	_____
Defined Benefit Plan	_____
Other	_____
Total \$	_____

Personal	
Barber / Beauty / Spa	_____
Cleaners / Laundry	_____
Clothing / Shoes / Accessories	_____
Pocket Money / ATM	_____
Toiletries	_____
Self Improvement	_____
Doctor / Dentist	_____
Medicines	_____
Total \$	_____

Food	
Groceries	_____
Liquor	_____
Dining Out	_____
Total \$	_____

Insurance	
Client A Life	_____
Client B Life	_____
Client A Disability	_____
Client B Disability	_____
Client A LTC	_____
Client B LTC	_____
Client A Health	_____
Client B Health	_____
Client A Vision	_____
Client B Vision	_____
Total \$	_____

Entertainment	
Cable TV / Internet / Streaming	_____
DVD / Music / Books / Video	_____
Smartphone Games & Apps	_____
Electronics	_____
Clubs	_____
Hobbies	_____
Lessons	_____
Subscriptions / Memberships	_____
Recreation	_____
Ticketed Events	_____
Vacation	_____
Total \$	_____

Support / Contributions	
Alimony	_____
Child Support	_____
Charity	_____
Church	_____
Political	_____
Credit Card Debt	_____
Other Installments	_____
Total \$	_____

Car Loan / Lease Balance: \$ _____
 Student Loan Balance: \$ _____
 Credit Card Balances: \$ _____

Totals:	_____
Monthly	_____
Annual	_____