

FINANCIAL WORKSHEET

Current Income

Marital Status

- Married
- Single
- Divorced
- Separated
- Widowed

List all dependents of you and your spouse, their ages, and relationship to you.

<u>Name</u>	<u>Age</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Part A. Debtor's Income:

1. What is your occupation? _____.
2. Name and address of employer?

3. How long have you been employed there? _____.
4. What is the gross amount of your paycheck, before taxes, and other deductions taken out?
_____.
5. How often do you get paid?
 once a week every two weeks twice a month
 once a month other _____.
6. Do you receive overtime pay outside your salary? If so, how much per month?
_____.
7. How much is taken out of each paycheck for taxes and social security?
_____.
8. How much is taken out for insurance? _____.
9. How much for union dues? _____.
10. Are there other deductions? If so, what are they and how much?
_____.

Do you receive . . .

- a) income from business operations outside of your regular paycheck listed above? If so, what is the business and how much do you receive?
_____.
- b) income from real estate property? If so, how much per month?
 No Yes \$_____.
- c) interest or dividends? If so, how much per month?
 No Yes \$_____.
- d) alimony or family support payments for your use or for the care of your dependents? If so, how much per month? No Yes \$_____.

- e) social security or other forms of monetary government assistance?
 No Yes \$_____.
- f) retirement or pension money? No Yes \$_____.

Do you have any other sources of income not listed?

_____.

Part B. Joint Debtor's Income:

11. What is your occupation? _____.

12. Name and address of employer?

13. How long have you been employed there? _____.

14. What is the gross amount of your paycheck, before taxes, other deductions taken out?
 _____.

15. How often do you get paid?

- once a week every two weeks twice a month
 once a month other _____.

16. Do you receive overtime pay outside your salary? If so, how much per month?
 _____.

17. How much is taken out of each paycheck for taxes and social security?
 _____.

18. How much is taken out for insurance? _____.

19. How much for union dues? _____.

20. Are there other deductions? If so, what are they and how much?
 _____.

Do you receive . . .

g) income from business operations outside of your regular paycheck listed above? If so, what is the business and how much do you receive?
 _____.

h) income from real estate property? If so, how much per month?

- No Yes \$_____.

i) interest or dividends? If so, how much per month?

- No Yes \$_____.

j) alimony or family support payments for your use or for the care of your dependents? If so, how much per month? No Yes \$_____.

k) social security or other forms of monetary government assistance?

No Yes \$_____.

l) retirement or pension money? No Yes \$_____.

Does your spouse have any other sources of income not listed?

_____.

Are you or your spouse expecting any increase or decrease in salary of more than 10% in the next year? If so, explain. _____

_____.

Current Expenses

Do you and your spouse maintain separate households? No Yes

The following questions are for your expenses each month.

1. Your rent or home mortgage \$ _____
Does that amount include real estate taxes? No Yes
Does it include property insurance? No Yes
2. Electricity and heating \$ _____
3. Water and sewage \$ _____
4. Telephone service / long distance \$ _____
5. Do you have any other utility bills? If so, what and how much? \$ _____
6. Home maintenance, including repairs and general upkeep \$ _____
7. Food \$ _____
8. Clothing \$ _____
9. Laundry and dry cleaning \$ _____
10. Medical and dental expenses \$ _____
11. Transportation (not including car payments) \$ _____
12. Entertainment, recreation, newspaper, magazines \$ _____
13. Charitable contributions \$ _____
14. Insurance not deducted from paycheck \$ _____
 - a) homeowner's or renter's insurance \$ _____
 - b) life insurance \$ _____
 - c) health insurance \$ _____
 - d) auto insurance \$ _____
 - e) other insurance _____ \$ _____
15. Taxes not deducted from paycheck \$ _____
16. Installment payments for car, furniture, etc. (Specify) \$ _____
_____ \$ _____

17. Alimony, maintenance, support paid to others \$ _____
18. Payments for support of dependents not living at home \$ _____
19. Expenses from operation of business \$ _____
20. Other expenses not listed above _____ \$ _____