

DIVORCE CARE CENTER



SEPARATING EMOTION FROM LOGIC

Monthly (Net) Income

Client _____
 Spouse _____
 Investment Income _____
 Other Income _____

Total Income \$ -

Monthly Expenses

House Mortgage (Incl. Escrow: Yes / No) _____
 Home Equity _____
 Car Payment 1 _____
 Car Payment 2 _____
 Personal Loans _____
 College Loans _____
 Master Card _____
 Visa _____
 Store Cards _____
 Other Debt _____
 Taxes (Pers. Prop., Real Estate, etc.) _____

\$ -

Electric (Budget Billing: Yes / No) _____
 Gas _____
 Water/Sewer _____
 Trash/Refuse/Recycling _____
 Phone and Cellular _____
 Groceries _____
 Gasoline/Cars _____
 Day Care/School _____
 Cable/Internet _____
 Entertainment (Eating Out, Movies, Etc.) _____
 Charities _____
 Miscellaneous Expenses _____

\$ -

Insurance/Savings:

Car Ins. (Number of Cars _____) _____
 Life Ins. (Individuals Covered _____) _____
 Disability Ins. (Individuals Covered _____) _____
 Health / Medical Ins. _____

Short Term Savings _____
 Long Term Savings _____
 Other Savings _____

\$ -

Total Expenses \$ -

Disposable Income / Loss \$ -