

INCOME, EXPENSES AND OTHER INFORMATION

Marital Status: (circle one)

Married

Single

Divorced

Separated

Widowed

Employment:

	<u>INDIVIDUAL DEBTOR</u>	<u>SPOUSE</u>
Occupation:		
Employer:		
How Long?:		
Street:		
City, State, Zip:		
Social Security #		

Dependents:

<u>Name:</u>	<u>Age:</u>	<u>Relationship:</u>

Pay Period(Circle One)	<u>DEBTOR</u> Weekly, Bi -Weekly, <u>2 -Month, Monthly</u>	<u>SPOUSE</u> Weekly, Bi -Weekly, <u>2 -Month, Monthly</u>
Gross Pay per Pay Period	\$	\$
Estimated overtime per Pay Period	\$	\$
Federal Income Taxes	\$	\$
State Income Taxes	\$	\$
Social Security Taxes	\$	\$
Insurance	\$	\$
Union Dues	\$	\$
Other Deductions:	\$	\$
Rental Income	\$	\$
Income from Operation of Business	\$	\$
Other Income:	\$	\$
	\$	\$
	\$	\$
Total Income	\$	\$

	<u>DEBTOR</u>	<u>SPOUSE</u>
Rent/Mortgage (<input type="checkbox"/> tax/ <input type="checkbox"/> insurance included)	\$	\$
Electricity and heating Fuel	\$	\$
Water and Sewer	\$	\$
Telephone	\$	\$
Insurance	\$	\$
Other Utilities:	\$	\$
Other Expenses:	\$	\$
Home Maintenance	\$	\$
Food	\$	\$
Clothing	\$	\$
Laundry and Dry Cleaning	\$	\$
Medical and Dental Expenses	\$	\$
Transportation (not including car payment)	\$	\$
Recreation, Clubs & Entertain., News, Magazines	\$	\$
Charitable Contributions	\$	\$
Homeowner's or Renter's Insurance	\$	\$
Life Insurance	\$	\$
Health Insurance	\$	\$
Auto Insurance	\$	\$
Other Insurance:	\$	\$
Taxes not included with mortgage or payroll:	\$	\$
Auto Installment Payments	\$	\$
Other Installments::	\$	\$
Alimony	\$	\$
Expenses from Business, Profession or Farm.	\$	\$
Other Expenses:	\$	\$
	\$	\$
Total	\$	\$