

## Worksheet 1: Your Monthly Fixed Expenses

Category of Expense		Monthly Amount
<b>Housing</b>	Mortgage / rent	
	Property taxes (divide by 12 if paid annually)	
	Utilities: water, sewer	
	Utilities: Electric	
	Utilities: Trash	
	Utilities: Home Phone	
	Other fixed Housing expenses	
<b>Transportation</b>	Car payment or lease payment	
	Gasoline (average monthly must-have amount)	
	Parking cost (if unavoidable)	
	Public transportation cost	
	Other fixed transportation expenses	
<b>Medical Expenses</b>	Recurring out-of-pocket necessary medical expenses (prescriptions, medical supplies, etc.)	
	Medical co-pays	
	Other fixed Medical expenses	
<b>Food</b>	Estimate the minimum amount of money you need for food every month	
<b>Non-food groceries</b>	Must-have non-food groceries (soap, toilet paper, etc.)	
<b>Insurance</b>	Health insurance (medical and dental)	
	Homeowner's / renter's insurance	
	Car insurance (per month)	
	Life insurance	
	Disability insurance	
	Long-term care insurance	
	Other fixed Insurance expenses	
<b>Legal Obligations</b>	Credit card payments	
	Student loan payments	
	Alimony / child support	
	Appliance payments	
	Other fixed contractual payments (cell-phone, gym membership, etc.)	
<b>Total Fixed Expenses for the Month:</b>		<b>\$</b>