

<i>Other Monthly Expense Detail</i>		
	Bor	Co-Bor
1. Rent		
2. Utilities <i>(If entering total here, leave (a) through (e) blank)</i>		
(a) Electricity & Gas		
(b) Water, Garbage & Sewer		
(c) Telephone & Internet Expenses		
(d) Television		
(e) Other		
3. Home Maintenance, upkeep and repairs		
4. Food		
5. Clothing, Laundry & Dry Cleaning		
6. Miscellaneous		
7. Medical & Dental expenses <i>(prescriptions and co-pays)</i>		
8. Transportation (Mass Transit, Parking, fuel)		
9. Recreation, clubs, entertainment,		
10. Charitable Donations		
11. Insurance <i>(not deducted from wages or included in payments)</i>		
(a) Homeowners or Renters		
(b) Life		
(c) Health & Disability		
(d) Auto		
12. Taxes <i>(not deducted from wages or included in payments)</i>		
13. Installment Payments		
(a)		
(b)		
(c)		
(d)		
14. Child Support Payments dependents not living at your home		
15. Regular expenses from operation of business, profession, or farm		
16. Alimony, maintenance, paid to others		
17. Other <i>(Describe)</i>		
18. Other <i>(Describe)</i>		
19. AVERAGE MONTHLY EXPENSES <i>(lines 1-18)</i>		
20. Describe any increase or decrease in expenditures reasonably anticipated to occur with 12 months		