

► **FINANCIAL INFORMATION STATEMENT**

Wife _____ Husband _____ Date of Marriage _____

A. Monthly Expenses

HOUSEHOLD	PRESENT
1. Rent/Mortgage	
2. Real Property Taxes/Insurance	
3. Cellular Phone	
4. TV/Internet	
5. Utilities (Gas, Water, Electric)	
6. Homeowner or Renter's Insurance	
7. Homeowner Association Fees	
8. Security System	
9. Pool Service	
10. Housekeeping/Cleaning Service	
11. Repairs and Maintenance	
12. Yard Maintenance	
13. Groceries and Household Supplies	
TOTAL HOUSEHOLD	\$
AUTO AND TRANSPORTATION FOR SELF	
14. Car Payment	
15. Car Insurance	
16. Gasoline and Oil	
17. Car Maintenance and Repair	
18. Other Transportation (Uber, Rentals, etc.)	
19. Tolls and Parking Fees	
20. Yearly Car License Tags	
TOTAL AUTO TRANSPORTATION FOR SELF	\$

A. Monthly Expenses (continued)

MEDICAL/DENTAL FOR SELF (not covered by ins.)	
21. Medical Doctor	
22. Dentist	
23. Dermatologists	
24. Counseling	
25. Prescriptions	
26. Vitamins	
TOTAL MEDICAL/DENTAL FOR SELF	\$
INSURANCE	
27. Life Insurance	
28. Health Insurance Premium (not paid by employer)	
TOTAL INSURANCE	\$
PERSONAL-SELF	
29. Clothing	
30. Laundry and Dry-cleaning	
31. Contributions and Donations (Charity/Religious)	
32. Barber/Hairdresser	
33. Entertainment	
34. Gifts	
35. Personal Toiletries	
36. Vacations	
37. Clubs and Membership Dues	
38. Veterinarian and Pet Food	
39. Financial Planning and Other Professional Services	
TOTAL PERSONAL-SELF	\$

A. Monthly Expenses (continued)

MISCELLANEOUS	
40. Subscriptions (iTunes, Spotify, Netflix, Newspapers, etc.)	
41. Retirement Contributions (Not deducted from paycheck)	
42. Monthly Credit Card Payments	
43. Other: Specify _____	
TOTAL MISCELLANEOUS	\$
SUMMARY TOTAL OF ALL EXPENSES	\$

B. Income Statement

SELECT PAY FREQUENCY:	
<input type="checkbox"/> Once per month	
<input type="checkbox"/> Twice per month	
<input type="checkbox"/> Every two weeks	
<input type="checkbox"/> Every week	
Gross Monthly Income (Attach Last 3 Pay Stubs)	
TOTAL MONTHLY INCOME	\$
MONTHLY NET INCOME	\$