

Current Expenditure Status	Col. 1	Col. 2	Col. 3	Col. 4
See Instructions for how to use this chart.	At time of Chapter 7 filing	Current Status (date)	National Norms	Comment
Rent or home mortgage payment (include lot rented for mobile home)			Box 2	
Are real estate taxes included? Yes ___ No ___				
Is property insurance included? Yes ___ No ___				
Utilities: Electricity and heating fuel				
Water and sewer				
Telephone				
Other _____				
Home Maintenance (Repairs and Upkeep)			Box 1	
Food				
Clothing				
Laundry and dry cleaning				
Medical and dental expenses			Box 4	
Transportation (not including car payments)				
Recreation, clubs and entertainment, newspapers, magazines, etc.			Box 4	
Charitable contributions				
Insurance (not deducted from wages or included in home mortgage payments):				
Homeowner's or renter's				
Life				
Health			Box 4	
Auto				
Other _____				
Taxes (not deducted from wages or included in home mortgage payments) (specify) _____			Box 3	
Installment payments (in chapter 12 and 13 cases, do not list payments to be included in the plan)				
Auto				
Other _____				
Other _____				
Alimony, maintenance, and support paid to others				
Payments for support of additional dependents not living at your home				
Regular expenses from operation of business, profession, or farm (attach detailed statement)				
Other _____				
TOTAL MONTHLY EXPENSES				