

## Jump Start Duluth Applicant Monthly Family Expenses

### Housing Expenses:

Rent \_\_\_\_\_  
Mortgage \_\_\_\_\_  
Property Taxes \_\_\_\_\_  
Homeowners/Renters Inc \_\_\_\_\_  
Home Repairs/Maintenance \_\_\_\_\_  
Other \_\_\_\_\_  
TOTAL

### Child/Dependent Related:

Child Support/Alimony \_\_\_\_\_  
Childcare/Daycare \_\_\_\_\_  
Education/School Supplies \_\_\_\_\_  
Children's Activities \_\_\_\_\_  
TOTAL

### Personal Expenses:

Cable TV/Movies \_\_\_\_\_  
Internet \_\_\_\_\_  
Dry Cleaning/Laundry \_\_\_\_\_  
Tobacco & Alcohol \_\_\_\_\_  
Clothing/Accessories \_\_\_\_\_  
Hair Products \_\_\_\_\_  
Beauty Salon/Barber Shop \_\_\_\_\_  
Recreation \_\_\_\_\_  
Other \_\_\_\_\_  
TOTAL

### Utilities:

Natural Gas/Heating \_\_\_\_\_  
Electricity \_\_\_\_\_  
Water/Sewer \_\_\_\_\_  
Trash \_\_\_\_\_  
Phone (land and Cell) \_\_\_\_\_  
TOTAL

### Health Related:

List if not deducted from pay-check

Health Insurance \_\_\_\_\_  
Dental Insurance \_\_\_\_\_  
Life Insurance \_\_\_\_\_  
Medical and Prescription Bills \_\_\_\_\_  
Other \_\_\_\_\_  
TOTAL

### Miscellaneous:

Charitable Gift Giving \_\_\_\_\_  
Gifts to Others \_\_\_\_\_  
Newspaper/Magazines \_\_\_\_\_  
Pet Care (food, grooming, vet) \_\_\_\_\_  
Allowences \_\_\_\_\_  
Membership Dues \_\_\_\_\_  
Education \_\_\_\_\_  
Monthly Financial Fees \_\_\_\_\_  
Other \_\_\_\_\_  
TOTAL

### Food:

Groceries \_\_\_\_\_  
Eating Out/Snacks \_\_\_\_\_  
TOTAL

### Debt Payments: List Monthly Payments

Credit Cards \_\_\_\_\_  
Student Loans \_\_\_\_\_  
Consumer Loans \_\_\_\_\_  
Business Loans \_\_\_\_\_  
Informal Loans (family/friends) \_\_\_\_\_  
TOTAL

### Transportation:

Car Payment \_\_\_\_\_  
Gas/Parking \_\_\_\_\_  
Car Insurance \_\_\_\_\_  
Maintenance/Repair \_\_\_\_\_  
Public Transportation (Bus/Taxi) \_\_\_\_\_  
Other \_\_\_\_\_  
TOTAL

### Investments/Savings:

401K/403B/IRA \_\_\_\_\_  
Stocks/Bonds \_\_\_\_\_  
Savings \_\_\_\_\_  
College Fund \_\_\_\_\_  
Emergency Fund \_\_\_\_\_  
TOTAL

**Total Monthly Expenses:**

### Unpaid Bills not in Collection

Unpaid Utilities \_\_\_\_\_  
Unpaid Rent \_\_\_\_\_  
Unpaid Medical Bills \_\_\_\_\_  
Money Owed to Banks/CU \_\_\_\_\_  
Other \_\_\_\_\_  
**TOTAL UNPAID BILLS:**