

MONTHLY INCOME & EXPENSE STATEMENT

Fill out form. Save your changes. Send completed form to Hoyes Michalos & Associates via
 EMAIL: statements@hoyes.com Fax 1-877-347-0660

Income and Expenses for the Month of: _____

Year: _____

Name: _____
 Address: _____
 Phone #: _____

Spouse's Name: _____
 Marital Status: _____
 # of People in Household: _____

MONTHLY FAMILY NET INCOME

	Bankrupt	Spouse
Employment Income	_____	_____
Pension/Annuities	_____	_____
Child Support	_____	_____
Spousal Support	_____	_____
Employment Insurance	_____	_____
Welfare/Social Assistance	_____	_____
Self Employed Income	_____	_____
Child Tax Benefit	_____	_____
Other net income	_____	_____
Total	\$ _____	\$ _____

MONTHLY FAMILY NON-DISCRETIONARY EXPENSES

Child Support Payments	_____
Spousal Support Payments	_____
Child Care	_____
Medical Expenses	_____
Fines/Penalties imposed by the court	_____
Expenses as a condition of employment	_____
Debts where stay has been lifted	_____
Other expenses	_____
Total	\$ _____

Monthly Family Discretionary Expenses

Household expenses

Rent/Mortgage	_____
Property Taxes/Condo fees	_____
Heat/Gas/Oil	_____
Telephone/Cell	_____
Cable/Internet	_____
Hydro	_____
Water	_____
Furniture	_____
Other	_____
Total	\$ _____

Personal expenses

Smoking	_____
Alcohol	_____
Dinning/Lunches/Restaurants	_____
Entertainment/Sports	_____
Gifts/Charitable donations	_____
Allowances	_____
Other	_____
Total	\$ _____

Non-recoverable medical expenses

Prescriptions	_____
Dental	_____
Total	\$ _____

Living expenses

Food / Groceries	_____
Laundry/Dry Cleaning	_____
Grooming / Toiletries	_____
Clothing	_____
Other	_____
Total	\$ _____

Transportation expenses

Car Lease / Loan	_____
Repairs / Gas / Maintenance	_____
Public Transportation	_____
Other	_____
Total	\$ _____

Insurance expenses

Vehicle	_____
House	_____
Furniture / Contents	_____
Life Insurance	_____
Other	_____
Total	\$ _____

Payments

To the estate	_____
To secured creditor	_____
Other	_____
Total	\$ _____

TOTAL NET INCOME	\$ _____
TOTAL EXPENSES	\$ _____
DIFFERENCE	\$ _____