

The Law Office of Carolyn M. Bone

DIVORCE | MEDIATION | FAMILY LAW

Client:

FINANCIAL FORMS

These forms are used to draft your sworn Financial Declaration, a notarized document required in nearly every SC Family Court case. We also use this information to draft detailed settlement agreements in matters involving financial issues. It is very important to your case that you provide truthful, accurate, and complete information when you fill out these forms.

If you have questions, please call the office (843-261-7025).

- If this is a CHILD-ONLY (paternity, custody, or support outside of marriage or involving third parties), ADOPTION, or MODIFICATION case, you only have to include information about your income, assets, debts, and household expenses.
- If this is a DIVORCE or SEPARATION, or otherwise involves property or debt division, you need to also include any information you have about the opposing party's income, assets, and debts (the opposing party is usually your spouse).
- If someone else in your household helps with expenses (like a new spouse), you would just note that. You do not need to provide proof of their income.

**Email all documents to
assistant@carolynbonelaw.com**

REQUIRED IN ALL CASES:

1. Provide your last three (3) pay stubs or other year-to-date documentation for each form of income.
2. Pull a credit report from any of the three Credit Bureaus at www.annualcreditreport.com, save it as a PDF, and email it. We do NOT need your credit score.
3. Provide your last three (3) years of business and personal tax returns (state and Federal).

YOUR INCOME

- **Type of Income:** You may have more than one kind of income. Select from the drop-down. Complete for all that apply AND provide documentation.
- **Rate:** Enter your rate of pay. Ex: *\$12/hour 40 hours/week* OR *\$45,000 salary*
- **Frequency:** Enter how often you are paid (bi-weekly = every other week, bi-monthly = 1st and 15th)
- **Gross:** Enter your **YEARLY gross** (before taxes). Please note any BONUS income even if it is not guaranteed. Check last year's W-2 or a year-to-date pay stub.

Email proof of income for each source.

Type of Income

Employer

Rate/frequency

Gross/year

Notes:

OPPOSING PARTY INCOME

- You may not have all of this information for the other party -that's okay. Put down any information that you DO know - even if it is just the place of employment or an estimated wage. Any information helps.
- Email any documentation of the other party's income that you may have on hand.

Type of Income	Employer	Rate/frequency	Gross/year
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Notes:

REAL ESTATE

Neither party owns real estate

Documents to Email:

- Current mortgage statement*
 - Any appraisals
 - Lease agreements for rental properties
 - Accounting of rental property expenses
 - Proof of other liens (tax liens, Home Equity Line [HELOC])
- *Check your county's website for tax liens against your property *

Property 1

Inherited, Pre-Marital, or Gifted?

- Address:
- Type of Property (home, rental)
- Name(s) on Title:
- Name(s) on Mortgage:
- Mortgage Balance:*
- Name(s) on Liens: (HELOC)
- Lien Balance(s):
- Appraised Value or Estimate:
 - Current Occupant(s):
 - Date Acquired:

Property 2

Inherited, Pre-Marital, or Gifted?

- Address:
- Type of Property (home, rental)
- Name(s) on Title:
- Name(s) on Mortgage:
- Mortgage Balance:*
- Name(s) on Liens: (HELOC)
- Lien Balance(s):
- Appraised Value or Estimate:
 - Current Occupant(s):

Retirement and Pensions

Documents to Email:

- Current retirement statement
- Month of marriage retirement statement (if possible)
- If your case has been filed with the Court, month of filing statement

- Neither party has any retirement accounts.
- ✓ ***This includes IRAs, ROTH IRAs, Annuities, 401(k)s, 403(b)s, Profit Sharing, and Employee Stock Purchase Plans***

Special Instructions for Active Military and Veterans, National Guard, Reserves:

- Date of Entry:
- Date of Exit:
- Branch of Service:

Do you have a Thrift Savings Plan (TSP) If YES, list separately from your pension.

Account 1

- a. Name on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Name of Employer/Former Employer/Payor:
- e. Dates of Employment:
- f. Current Balance:
- g. Loans Against Account:
- h. Beneficiary Name(s):
- i. In Pay Status If YES, list the payment amount:

Retirement and Pensions

Account 2

- a. Name on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Name of Employer/Former Employer/Payor:
- e. Dates of Employment:
- f. Current Balance:
- g. Loans Against Account:
- h. Beneficiary Name(s):
- i. In Pay Status If YES, list the payment amount:

Account 3

- a. Name on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Name of Employer/Former Employer/Payor:
- e. Dates of Employment:
- f. Current Balance:
- g. Loans Against Account:
- h. Beneficiary Name(s):
- i. In Pay Status If YES, list payment amount.

Notes:

Retirement and Pensions

Account 4

- a. Name on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Name of Employer/Former Employer/Payor:
- e. Dates of Employment:
- f. Current Balance:
- g. Loans Against Account:
- h. Beneficiary Name(s):
- i. In Pay Status If YES, list the payment amount:

Account 5

- a. Name on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Name of Employer/Former Employer/Payor:
- e. Dates of Employment:
- f. Current Balance:
- g. Loans Against Account:
- h. Beneficiary Name(s):
- i. In Pay Status If YES, list payment amount.

Notes:

Bank and Investment Accounts

Documents to Email

- Current statement for each account
- Month of marriage statement (if possible)
- If your case has been filed with the Court, month of filing statement.

***Make sure to include Certificates of Deposit (CDs), Annuities, Business Accounts, Money Market accounts, and the like.*

Account 1

Inherited, Pre-Marital, or Gifted funds?

- Name(s) on Account:
- Type of Account:
- Bank/Institution:
- Date Opened:
- Current Balance:
- Loans Against Account:
- Beneficiary Name(s):

Account 2

Inherited, Pre-Marital, or Gifted Funds?

- Name(s) on Account:
- Type of Account:
- Bank/Institution:
- Date Opened:
- Current Balance:
- Loans Against Account:
- Beneficiary Name(s):

Notes:

Bank and Investment Accounts

Account 3

Inherited, Pre-Marital, or Gifted funds?

- a. Name(s) on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Date Opened
- e. Current Balance:
- f. Loans Against Account:
- g. Beneficiary Name(s):

Account 4

Inherited, Pre-Marital, or Gifted Funds?

- a. Name(s) on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Date Opened
- e. Current Balance:
- f. Loans Against Account:
- g. Beneficiary Name(s):

Notes:

Bank and Investment Accounts

Account 5

Inherited, Pre-Marital, or Gifted funds?

- a. Name(s) on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Date Opened
- e. Current Balance:
- f. Loans Against Account:
- g. Beneficiary Name(s):

Account 6

Inherited, Pre-Marital, or Gifted Funds?

- a. Name(s) on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Date Opened
- e. Current Balance:
- f. Loans Against Account:
- g. Beneficiary Name(s):

Notes:

Bank and Investment Accounts

Account 7

Inherited, Pre-Marital, or Gifted funds?

- a. Name(s) on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Date Opened
- e. Current Balance:
- f. Loans Against Account:
- g. Beneficiary Name(s):

Account 8

Inherited, Pre-Marital, or Gifted Funds?

- a. Name(s) on Account:
- b. Type of Account:
- c. Bank/Institution:
- d. Date Opened
- e. Current Balance:
- f. Loans Against Account:
- g. Beneficiary Name(s):

Notes:

Businesses and Stock

Documents to Email

- Current statement for each account of any kind
- Month of marriage statement (if possible)
- If your case has been filed with the Court, month of filing statement
- Profit and Loss Statements and Balance Sheets - past 3 years
- Partnership Agreements, Franchise Agreements, etc.
- Any business valuations

A. BUSINESS INTERESTS

NOT APPLICABLE

▪ BUSINESS 1:

Is any part Inherited, Pre-Marital, or Gifted?

a. Name of Business:

b. Type of Business:

c. Name(s) of Owners:

d. Percentage Owned:

e. If Incorporated, in what form (LLC, etc)

f. State of Incorporation:

g. Date of Incorporation:

h. If Sole Proprietorship, date business began:

i. Bank(s)/Institution(s) holding account(s):

Notes:

Businesses and Stock

▪ BUSINESS 2:

Is any part Inherited, Pre-Marital, or Gifted?

- a. Name of Business:
- b. Type of Business:
- c. Name(s) of Owners:
- d. Percentage Owned:
- e. If Incorporated, in what form (LLC, etc)
- f. State of Incorporation:
- g. Date of Incorporation:
- h. If Sole Proprietorship, date business began:
- i. Bank(s)/Institution(s) holding accounts:

B. INDIVIDUAL STOCKS AND BONDS

**You do not need to include stocks and bonds that are already listed as part of a retirement or investment account.*

1. Company:

Shares:

Ownership:

Date acquired:

2. Company:

Shares:

Ownership:

Date acquired:

Notes:

Inherited, gifted, or pre-marital?

Cryptocurrency, NFTs, Alternative Investments, Cash

NOT APPLICABLE

- If you have ANY form of cryptocurrency, foreign currency investments, Non-fungible Tokens (NFTs), "Angel Investments," or other alternative investments, you must disclose.

Email any documents showing you or the opposing party's ownership, purchase price, current value, and other relevant information for each asset.

More than \$500 cash If so,
state amount and location.

Cryptocurrency, NFT's, or other
alternative investments

- Type(s)/# tokens:
- Owner:
- Exchange/Wallet/
Account
- Purchase price:
- Purchase date:
- Current value:

Airline Points

Vacation or other
loyalty points

Credit card points

Notes:

Inherited, gifted, or pre-marital?

Children's Accounts

**This includes children's savings accounts,
UGMA accounts, and College 529 Plans*

Email a current statement for
each account

CHILDREN'S ACCOUNTS

Account 1:

- a. Type of Account:
- b. Bank/Institution:
- c. Name(s) of Child(ren):
- d. Name(s) of Custodians:
- e. Current balance:

Account 2:

- a. Type of Account:
- b. Bank/Institution:
- c. Name(s) of Child(ren):
- d. Name(s) of Custodians:
- e. Current balance:

Account 3:

- a. Type of Account:
- b. Bank/Institution:
- c. Name(s) of Child(ren):
- d. Name(s) of Custodians:
- e. Current balance:

Notes:

Vehicles and Boats, Recreational Crafts

Email a current loan statement and any estimated current value (*we recommend you send both the tax assessed and KKelly Blue Book values. You can run a KKBB online.)

**This includes ATVs, golf carts, dirt bikes, jet skis, pontoon boats, etc.*

Vehicle 1: *Inherited, gifted, or pre-marital?* *Who has use currently?*

a. Make/Model/
Year:

b. Title/Lease
Ownership: *sole joint* *Name(s):*

c. Balance on
Note/Loan: *Leased?*

d. Purchase
price:

e. Purchase
date:

f. Current value:

Vehicle 2: *Inherited, gifted, or pre-marital?* *Who has use currently?*

a. Make/Model/
Year:

b. Title/Lease
Ownership: *sole joint* *Name(s):*

c. Balance on
Note/Loan: *Leased?*

d. Purchase
price:

e. Purchase
date:

f. Current value:

Notes:

Life Insurance

Email a current statement showing ownership, death benefits, and beneficiary(s). If the policy has cash value (usually Whole Life), provide a current value statement.

Policy 1:

Term

Whole

SGLI (Military)

- a. Ownership:
- b. Company:
- c. Amount death benefit:
- d. Beneficiary Name(s)
- e. Loans against policy:
- f. Date Acquired:
- g. Cash value (if any)

Policy 2:

Term

Whole

SGLI (Military)

- a. Ownership:
- b. Company:
- c. Amount death benefit:
- d. Beneficiary Name(s)
- e. Loans against policy:
- f. Date Acquired:
- g. Cash value (if any)

Notes:

Health Insurance

IF YOUR MATTER DEALS WITH CHILD SUPPORT: Ask your Human Resources person to email you a breakdown of Individual/ Full Family/Child Only Employee Out of Pocket Rates.

Client does not have healthcare insurance

Child(ren) do not have healthcare insurance.

Opposing party does not have healthcare insurance

Client has Medicare (65+)

Client has Medicaid

Opposing party has Medicare (65+)

Opposing party has Medicaid

Child(ren) have Medicaid

Opposing party and client have separate healthcare insurance. (i.e. you do not cover your spouse and your spouse does not cover you).

If you provide coverage for a spouse or children OR if the opposing party provides coverage for you or children, provide the following:

a. Name of person providing coverage:

b. Employer/Private Plan:

c. Name of Insurance Company:

d. Name(s) of covered under policy:

e. Self: Medical Dental Vision Other

f. Spouse: Medical Dental Vision Other

g. Children: Medical Dental Vision Other

Health Savings Account? If so, provide a current statement.

Ownership?

Notes:

Debts

- *All debts in your name should already be listed on your credit report. You will need your credit report to complete this section. [www.annualcreditreport.com]*
- *IF THIS IS A CHILD-ONLY, ADOPTION, OR MODIFICATION, you are done with the debt section.*

IF THIS IS A DIVORCE OR SEPARATION (check all that apply):

There are no jointly held debts.

I have debt that was incurred before marriage or after the date this case was filed or that is otherwise non-marital (list debts below) .

❖ If you have any information about your spouse's debts, please list the name(s) of the creditor(s) and amount of each debt and **email any statements you have:**

❖ List any other debts or liabilities that do NOT appear on your credit report. Provide as much information as possible. (Creditor, date incurred, why incurred, amount owed currently, etc.)

Personal Property

- *Most clients divide their personal property without the help of counsel, due to the expense. If you or your spouse have personal property that you need our help to handle (ex.: the return of sentimental items) or that is of substantial value and may need to be appraised (art, coins, jewelry), please email your attorney details as a separate document.*
- *If you would like to provide a list of items you wish to have returned from the other party, please email your list as a separate document.*

There are no personal property issues.

I will submit a personal property list via email.

I will email details about valuable personal property together with any appraisals.

- ❖ If you or your spouse have any other assets (estimated value of \$1,000) or debts that have not otherwise been provided, please provide that information below: **and email any statements or appraisals you have:**

- ❖ List any other debts or liabilities that do NOT appear on your credit report. Provide as much information as possible. (Creditor, date incurred, why incurred, amount owed currently, etc.) Provide documentation if you can.

Additional Documentation and Taxes

- *Please check through the choices below and email any of the additional documents that may apply to your case.*
- *Please ensure that you do not owe any tax debts, particularly if you filed joint returns during the marriage. If you or your spouse owe tax debt, please email your attorney with documentation. Note: We cannot give tax advice, however, we are happy to work with your CPA or financial planner.*

➤ Check all that apply and email the relevant documents:

Prenuptial Agreement

Post-Nuptial Agreement

Estate planning documents (if completed with spouse)

Trust documents

Contractual agreements (obligations and/or received value)

Powers of Attorney (General, Healthcare)

Legal judgments or pending cases involving either spouse (incl. personal injury)

Judgments and settlement information from any other legal actions

➤ Relevant government benefits (in-kind, cash, vouchers, subsidized services)

Daycare Vouchers (SC Vouchers - Formerly ABC)

Housing Assistance / Section 8"/ Subsidized housing

WIC / SNAP /"Food Stamps"

TANF /"Welfare"

Supplemental Security Income Program (SSI)

Benefits related to the adoption of a child

Benefits related to a disabled or orphaned dependent

Court orders for you to PAY or RECIEVE child and/or spousal support - even if not paid.

If your case involves CHILD SUPPORT, provide detailed documentation of your work-related childcare expenses and your payment of same. This includes before school, after school, and summer/school break care.

Copy of Special Needs Trust or other benefits/documents related to a Dependent with special needs.

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DIVORCE | MEDIATION | FAMILY LAW

BUDGET FORM

- This Budget Form is provided to help you complete page two of the required Financial Declaration form (**South Carolina Rules of Family Court, Rule 20**) which you will sign under oath, file with the Family Court, and about which you may be cross-examined. It is very important you are truthful and accurate.
- All expenses must be stated on a monthly basis. If you cover expenses for the opposing party or someone else, please put that in the NOTES section of the relevant page.
- Do not rely solely on your memory or estimates; review credit card statements, utility bills, etc. You should base your calculations on your historical expenditures or reasonable estimates for future expenses.
- If any expenses are routinely paid just with a credit card that is listed under "Installment Payments," please indicate that in the NOTES section on the relevant page.

1. Who lives in your household? (Who does your household budget cover?)

2. Residential Rent Payment

a. Rent

b. Renter's
Insurance

TOTAL :

3. Residential Mortgage
Payment

a. Mortgage payment:

b. HELOC

**Homeowner's Insurance
ESCROWED**

Property Taxes ESCROWED

TOTAL

**If taxes and insurance are NOT escrowed, note on #13
AND #14**

List vacation or rental property on a separate page.

4. Food and Household Supplies

- a. Grocery store
- b. Toiletries
- c. Cleaning supplies
- d. Drug Store
- e. Convenience
- f. Walmart/Target
- g. Fast food
- h. Casual meals out

TOTAL:

5. Utilities (Residential)

- a. Electricity
- b. Gas
- c. Water
- d. Sewer
- e. Garbage

TOTAL:

6. Cellular and Landline Telephone Service

- a. Cellular Phone Plan:
 - i. Line 1:
 - ii. Line 2:
 - iii. Line 3:
 - iv. Line 4:
- b. Landline Phone:

TOTAL:

7. Medical, Dental, Liability, Disability, and Other Premiums NOT Deducted from Pay

- a. Medical
- b. Dental
- c. Liability
- d. Umbrella
- e. Disability
- f. Other

TOTAL:

8. PAYMENT of Child Support: [Prior Children]

- a. Support
- b. Support 2:
- c. Support 3:

Email Court Orders

TOTAL:

Notes:

- **Indicate if you are in arrears (behind) on each obligation. If so, how much?**
- **Indicate if you are paying voluntarily or via Court Order.**
- **Provide the names of the chil(ren) supported and the Payee(s).**

Check here if you are paying support for child(ren) of this action, voluntarily or via Court Order. Provide details in the notes.

9. Work-Related Childcare Expenses:

Email proof of ALL childcare expenses. This directly impacts child support.

- a. Regular Daycare (full time or part)
- b. After-School
- c. Before-School
- d. Summer care
- e. Holiday/break care
- f. After-hours care

TOTAL:

- **Do not include sitters or camps used for non-work hours/purposes- include under #22, *Children's Incidentals*.**
- **If you pay an individual or family member for care, you need to provide six months-year of proof of payment (Venmo transactions, receipts, checks, etc.)**
- **Break down all amounts into MONTHLY totals (so if you pay \$1000/year for summer camp, the number would be \$1,000/12 \$83.33/month)**

10. Spousal Support PAID (Prior Spouse)

a. Support 1

b. Support 2

Email Court Orders

TOTAL:

Notes:

- **Indicate if you are in arrears (behind) on each obligation. If behind, how much?**
- **Indicate if you are paying voluntarily or via Court Order.**
- **Provide the names of the prior spouse(s) supported and the Payee(s).**

Check here if you are paying support for the spouse of this action (voluntary or ordered). Provide details in the notes.

11. Auto, Motor Vehicle, and Boat
Payments

- **Include payments on the monthly financing ONLY. Taxes and insurance are below (included in #12).**

- a. Vehicle 1
- b. Vehicle 2
- c. Vehicle 3
- d. Vehicle 4
- e. Vehicle 5
- f. Vehicle 6
- g. Vehicle 7

TOTAL:

Notes for Settlement: Who uses each vehicle? If someone other than you is making payments, please note. What do you want to happen with each vehicle?

12. Auto, Motor Vehicle, & Boat
Expenses

Vehicle 1

- i. Insurance
- ii. Gas
- iii. Repairs
- iv. Oil Changes
- v. Routine Maintenance
- vi. Property Tax

Please note if you drive a company vehicle or get reimbursed for vehicle expenses. Maintenance includes tires and tune-ups.

VEHICLE 1 TOTAL:

Vehicle 2

- i. Insurance
- ii. Gas
- iii. Repairs
- iv. Oil Changes Routine
- v. Maintenance Property
- vi. Tax

VEHICLE 2 TOTAL

Vehicle 3

- i. Insurance
- ii. Gas
- iii. Repairs
- iv. Oil Changes
- v. Routine Maintenance
- vi. Property Tax

VEHICLE 3 TOTAL

Vehicle 4

- i. Insurance
- ii. Gas
- iii. Repairs
- iv. Oil Changes
- v. Routine Maintenance
- vi. Property Tax

VEHICLE 4 TOTAL

VEHICLE 5

- i. Insurance
- ii. Gas
- iii. Repairs
- iv. Oil Changes
- v. Routine Maintenance
- vi. Property Tax

VEHICLE 5 TOTAL

VEHICLE 6

- i. Insurance
- ii. Gas
- iii. Repairs
- iv. Oil Changes
- v. Routine Maintenance
- vi. Property Tax

VEHICLE 6 TOTAL

VEHICLE 7

- i. Insurance
- ii. Gas
- iii. Repairs
- iv. Oil Changes
- v. Routine Maintenance
- vi. Property Tax

VEHICLE 7 TOTAL

**TOTAL VEHICLE
EXPENSES:**

13. Residential Property Tax

- *If you have rental property, provide a breakdown of income and expenses separately*
- *PUT ZERO IF ESCROWED (PAID WITH MORTGAGE EACH MONTH)*

TOTAL

14. Residential Property Insurance

- *If you have rental property, provide a breakdown of income and expenses separately*
- *PUT ZERO IF ESCROWED (PAID WITH MORTGAGE EACH MONTH)*

TOTAL

15. Maintenance for Household

- a. Ordinary repairs/appliance repair
- b. Ordinary maintenance
- c. Landscaping
- d. Pool service
- e. Exterminator/Pest
- f. Termite bond
- g. Housekeeping service
- h. Pressure washing
- i. Security system/alarm
- j. Service contracts
- k. Homeowner's Assc. Fees
- l. Miscellaneous

TOTAL

Notes:

16. Adult clothing, shoes, & accessories

17. Children's clothing, shoes, & accessories

- Remember to calculate the average monthly amount
- Consider things like seasonal clothing, formal clothing, socks, etc.
- Even if you don't buy clothing often, you almost certainly have to replace worn things.

18. Cable and Internet (Residential)

- a. Cable
- b. Internet
- c. Satellite
- d. Other

TOTAL

19. Laundry Service/ Laundromat & Dry Cleaning

- a. Laundry
- b. Dry clean service

TOTAL

Notes:

20. Out-of-Pocket Medical and
Dental Expenses (Adults and
Children)

Notes:

- a. Co-pays
- b. Deductibles
- c. Uncovered medical/
prescriptions
- d. Uncovered dental
- e. Uncovered vision
exams
- f. Orthodontics
- g. Appliances and
devices
- h. Vitamins and
supplements
- i. Over-the-counter
medication
- j. Mental health
(counseling, therapy)
- k. Other

TOTAL

21. Out-of-Pocket Glasses and
Contacts

22. Children's Incidentals

Notes:

- a. Lessons
- b. Sports (fees)
- c. Extracurricular expenses (instruments, travel)
- d. Sporting equipment, shoes, etc.
- e. Activity uniforms
- f. Yearbooks/Photos
- g. Haircuts
- h. Allowance
- i. Non-work childcare (babysitters)/camp for fun*
- j. Birthday gifts
- k. Birthday parties
- l. Other

TOTAL

**When NOT used for work-related childcare*

23. School Lunches, Supplies, Field Trips, and Fees

- a. Tuition
- b. Uniforms
- c. School lunch/meals
- d. School supplies
- e. Field trips
- f. Fees
- g. Locker rental
- h. Dues
- i. Tutoring

TOTAL:

24. Entertainment

- a. Vacations and non-work trips
- b. Events and concerts
- c. Sports tickets
- d. Movies
- e. Theater and cultural
- f. iTunes, Spotify, Music streaming
- g. Video streaming
- h. Gaming
- i. Phone apps
- j. Shopping for fun
- k. Bar tabs
- l. Gym membership
- m. Other

TOTAL:

Notes:

25. Adult Incidentals *(do not include things purchased routinely at grocery store or that have already been included elsewhere)*

- a. Haircuts
- b. Nails/lashes/tanning/cosmetic procedures/massages
- c. Cosmetics
- d. Newspaper/subscriptions/books
- e. Gifts (weddings, holidays)
- f. Home decor
- g. Vet expenses/grooming/animal care
- h. Tax preparation/accounting
- i. Religious tithes
- j. Bank fees
- k. Tobacco/vape
- l. Hobbies
- m. Clubs/organizations
- n. Charity
- o. Other

TOTAL

Notes:

26. Installment Payments

Include all installment payments NOT already listed elsewhere. Usually credit cards.

CREDITOR	FOR	MONTHLY \$	BALANCE	OWED BY
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TOTAL

27. Debts and Obligations NOT Payable in Monthly Installments

CREDITOR	FOR	DATE DUE	BALANCE	OWED BY
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ADDITIONAL FINANCIAL NOTES PAGE

