In re	Case No.: (If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home) $_____

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) $_____
Food $_____
Clothing $_____
Laundry and dry cleaning $_____
Medical and dental expenses $_____
Transportation (not including car payments) $_____
Recreation, clubs and entertainment, newspapers, magazines, etc. $_____
Charitable contributions $_____
Insurance (not deducted from wages or included in home mortgage payments):
Homeowner's or renter's $_____
Life $_____
Health $_____
Auto $_____
Other_____ $_____
Taxes (not deducted from wages or included in home mortgage payments) $_____
(Specify)_____ $_____
Installment payments (In chapter 12 and 13 cases, do not list payments to be included in the
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 (Report also on Summary of Schedules) $_____

[FOR CHAPTER 12 AND 13 DEBTORS ONLY]
Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income $_____
B. Total projected monthly expenses $_____
C. Excess income (A minus B) $_____
D. Total amount to be paid into plan each _____ $_____
(interval)