



finance YOUR DETOUR

FIXED EXPENSES WORKSHEET

INSTRUCTIONS

This worksheet will help you identify all of your fixed monthly expenses. Write the total amount you spend per month for each item, only if it applies to you. If the cost varies from month to month, try to come up with an average amount for that item. You can use the blank spaces in each category to add any items that are not included.

HOUSING

MORTGAGE \$ _____

2ND MORTGAGE \$ _____

RENT \$ _____

HOA \$ _____

_____ \$ _____

MEMBERSHIPS/ SUBSCRIPTIONS

GYM \$ _____

VIDEO/TV \$ _____

MUSIC \$ _____

MAGAZINE \$ _____

HOBBIES/CLUBS \$ _____

FOOD/DRINK \$ _____

CLOTHES \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

UTILITIES

ELECTRICITY \$ _____

WATER \$ _____

GAS \$ _____

CELL PHONE \$ _____

INTERNET \$ _____

CABLE \$ _____

TRASH \$ _____

_____ \$ _____

_____ \$ _____

TRANSPORTATION

CAR PAYMENT 1 \$ _____

CAR PAYMENT 2 \$ _____

PARKING \$ _____

PUBLIC TRANS. \$ _____

TOLLS \$ _____

ADD. VEHICLES \$ _____

_____ \$ _____

_____ \$ _____

INSURANCE

AUTO \$ _____
HOME \$ _____
RENTERS \$ _____
LIFE \$ _____
HEALTH \$ _____
DISABILITY \$ _____
ID THEFT \$ _____
ADD. VEHICLE \$ _____
LONG TERM CARE \$ _____
PET \$ _____
_____ \$ _____
_____ \$ _____

FAMILY

CHILD CARE \$ _____
EDU./TUITION \$ _____
CHILD SUPPORT \$ _____
SPORTS/CLUBS \$ _____
ALIMONY \$ _____
PET CARE \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

MISCELLANEOUS

STORAGE UNIT \$ _____
CLEANING \$ _____
LAUNDRY \$ _____
MEDICATIONS \$ _____
SUPPLEMENTS \$ _____
BUSINESS \$ _____
PERSONAL CARE \$ _____
DONATION \$ _____
_____ \$ _____
_____ \$ _____

DEBT

CREDIT CARD 1 \$ _____
CREDIT CARD 2 \$ _____
CREDIT CARD 3 \$ _____
CREDIT CARD 4 \$ _____
STUDENT LOAN \$ _____
STUDENT LOAN \$ _____
MEDICAL \$ _____
RETAIL CREDIT \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____