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BUDGET QUESTIONS

INCOME

Gross Wages per Pay Period:

1. How often do you get paid?

Husband: _____ Wife: _____

2. What is the gross pay each period (before deductions)

Husband: _____ Wife: _____

3. Amount, if any, received from overtime on average paycheck:

Husband: _____ Wife: _____

4. What are the deductions per pay period for:

	<u>Husband</u>	<u>Wife</u>
(a) Payroll taxes (including social security)	\$ _____	\$ _____
(b) Insurance	\$ _____	\$ _____
(c) Union dues	\$ _____	\$ _____
(d) Other (specify)	\$ _____	\$ _____

Other income per month:

5. If self-employed: gross income from business: \$ _____ \$ _____

6. From real property: \$ _____ \$ _____

7. Interest and dividends: \$ _____ \$ _____

8. Social security and other government assistance: \$ _____ \$ _____

9. Pension and retirement income \$ _____ \$ _____

10. Spousal support: \$ _____ \$ _____

11. Child Support: \$ _____ \$ _____

12. Other income: specify source \$ _____ \$ _____

13. For any child support received: please write name, age, and relationship of each child for whom you receive support.

14. If you think that you income may increase or decrease more than 10% within the next year, describe why you think so, and the amount of the increase or decrease. (if you income is seasonal, put in which months are the 'good' and/or 'bad' season, and the amount of the monthly increase or decrease in income during this season.

MONTHLY EXPENSES

	<u>Husband</u>	<u>Wife</u>
15. Rent/mortgage payment:	\$ _____	\$ _____
Are property taxes included?	_____	_____
Is property insurance included?	_____	_____
16. Home maintenance:	\$ _____	\$ _____
17. Electricity, heating fuel:	\$ _____	\$ _____
18. Water and sewer:	\$ _____	\$ _____
19. Telephone:	\$ _____	\$ _____
20. Garbage:	\$ _____	\$ _____
21. Security:	\$ _____	\$ _____
22. Cable:	\$ _____	\$ _____
23. Other Utilities: _____	\$ _____	\$ _____
24. Food:	\$ _____	\$ _____
25. Clothing:	\$ _____	\$ _____
26. Laundry/ dry cleaning:	\$ _____	\$ _____
27. Medical/ dental:	\$ _____	\$ _____
28. Transportation:	\$ _____	\$ _____
29. Recreation/ clubs/ entertainment/ newspapers/ periodicals/ books:	\$ _____	\$ _____
30. Charitable Contributions:	\$ _____	\$ _____
31. Homeowner's/ renter's insurance:	\$ _____	\$ _____
32. Life insurance: (if not deducted from paycheck)	\$ _____	\$ _____
33. Health insurance: (if not deducted from paycheck)	\$ _____	\$ _____
34. Auto insurance:	\$ _____	\$ _____
35. Other insurance: (if not deducted from paycheck)	\$ _____	\$ _____

36. Real estate taxes: (if not
escrowed with mortgage) \$ _____ \$ _____

37. Other taxes: (include estimated
quarterly taxes not deducted
from paycheck if you pay these) \$ _____ \$ _____

38. Auto installment payments: \$ _____ \$ _____

39. Other installment payments:
put name of item for which
payments are being made:

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

40. Child support paid: \$ _____ \$ _____

41. Spousal support paid: \$ _____ \$ _____

42. Other expenses:

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____