

CJA 23 - SCHEDULE A
LIST OF INCOME AND DEBTS, BILLS AND EXPENSES

NAME: _____

INCOME

Gross Monthly Income. \$ _____
 Less Deductions (Federal and State income tax withholdings, etc.). \$ - _____
 NET MONTHLY INCOME. \$ _____
 TOTAL MONTHLY DEBTS, BILLS & EXPENSES (From Bottom Line Below).. \$ - _____
 BALANCE (Disposable Income). . . . \$ _____

DEBTS, BILLS AND EXPENSES

<u>ITEM</u>	<u>TOTAL DEBT</u>	<u>MONTHLY PAYMENT</u>
Home Rent or Mortgage.	\$ _____	\$ _____
Utilities:		
Electric.	_____	_____
Heating Oil/Gas.	_____	_____
Water/Sewer.	_____	_____
Telephone.	_____	_____
Groceries, supplies.	_____	_____
Insurance:		
Auto.	_____	_____
Health.	_____	_____
Life.	_____	_____
Homeowners/renters.	_____	_____
Bank Loans.	_____	_____
Credit Cards.	_____	_____
Transportation.	_____	_____
Hospital.	_____	_____
Doctor.	_____	_____
Dentist.	_____	_____
Medicine.	_____	_____
Clothing.	_____	_____
Alimony/Child support.	_____	_____
Day care.	_____	_____
Court Fines.	_____	_____
Other _____	_____	_____
_____	_____	_____
_____	_____	_____
TOTAL DEBTS, BILLS & EXPENSES	\$ _____	\$ _____