**Friday’s Child Adoption Services, Inc.**

Monthly Expense Report

Adoptive Parent Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please estimate the following figures, on a monthly basis, as accurately as possible

|  |  |  |
| --- | --- | --- |
| **Expense Item** | **Amount** | **Comments** |
| Rent or Mortgage | $ |  |
| Electric/Gas | $ |  |
| Water/Sewer | $ |  |
| Garbage | $ |  |
| Phone/Cellular/Internet/Cable | $ |  |
| Credit Cards | $ |  |
| Bank Loans | $ |  |
| Child Support Payments | $ |  |
| Alimony | $ |  |
| Groceries | $ |  |
| Medical Expenses/Prescriptions | $ |  |
| Health Insurance | $ |  |
| Life Insurance | $ |  |
| Car Insurance | $ |  |
| Homeowners Insurance | $ |  |
| Gas & Car Repairs | $ |  |
| Car Loan Payment | $ |  |
| Entertainment | $ |  |
| Child Care | $ |  |
| Personal expenses (haircuts, nails etc,) | $ |  |
| Clothes | $ |  |
| Lawn Care | $ |  |
| Gifts | $ |  |
| Vacations | $ |  |
| Education | $ |  |
| Other | $ |  |
| Other | $ |  |
| **Total Monthly Expenses** | **$** |  |

|  |  |  |
| --- | --- | --- |
| Net Monthly Income | $ |  |
| Child Support Income | $ |  |
| Bonuses | $ |  |
| Other | $ |  |
| Total Net Income | $ |  |