## - MOVIE OF YOUR LIFE WORKSHEET ----

	MONTHLY	ANNUAL	START/END DATE
HOUSING			
Utilities			
Electricity/Gas			
Telephone			
Cable/Satellite/DSL			
Maintenance			
Security System			
Garbage Pickup			
Rent			
Community Dues			
Other			
Total			
INSTALLMENT DEBT Mortgage(s) Student Loan(s)			
Credit Card(s)			
Other			
Other			
CHILD CARE			
Daycare			
Sports Activities			
Other			
Total			
FOOD / BEVERAGES Groceries			
Win/Beer/etc.			
Household Supplies			
Other			
Total			
TRANSPORTATION Loan/Lease Gas			
Maintenance			
Tags/Inspection			
Other			
Total			

	MONTHLY	ANNUAL	START/END DATE
ENTERTAINMENT			
Dining Out			
Sports Tickets			
Theater Tickets			
Hobbies			
Movies/Videos			
Clubs			
Other			
Other			
Total _			
PERSONAL CARE			
Dry Cleaning			
Health Club			
Vitamins/Nonprescribed			
Medication			
Other			
Other			
Total _			
CLOTHING			
Husband			
Wife			
Children			
Total _			
FURNISHINGS			
Indoor			
Outdoor			
-			
-			
EDUCATION			
Private School/College			
Classes Other			
Total _			
VACATIONS			
VACATIONS AND HOLIDAYS			
Airfare			
Hotels			
Food			
Entertainment			
Entertainment			
-			
Auto			

	MONTHLY	MONTHLY	MONTHLY
GIFTS			
Holidays			
Birthdays			
Weddings			
Other			
iotai			
PETS			
Food			
Veterinarian			
Other			
Total			
MISCELLANEOUS			
Other			
Other			
Other			
Total			
ALIMONY			
Iotai			
MEDICAL EXPENSES			
Co-Pay			
Deductible			
Prescribed Medication			
Dental			
Contacts/Eyeglasses			
Other			-
10001			
REAL ESTATE AND PRO	OPERTY TAXE	S	
Total			
GIFTS TO CHARITY			
House of Worship			
Other			
Other			
10001			
EMPLOYMENT/BUSIN	ESS EXPENSE	S GENERAL	
Other			
Other			
Other			
Iotal			

## - MOVIE OF YOUR LIFE WORKSHEET

	MONTHLY	ANNUAL	START/END DATE
UNREIMBURSED EMP	LOYEE EXPEN	NSES	
Total			
MISCELLANEOUS DED	UCTIBLE EXP	ENSES	
(Subject to 2% Limit)			
Total			
MISCELLANEOUS DED	UCTIBLE EXP	ENSES	
(Above the Line)			
Total			
MISCELLANEOUS DED (Itemized)	UCTIBLE EXP	ENSES	
Total			

	MONTHIY	ANNUAL	START/FND
LIFE INSURANCE		711110712	DATE
Policy 1			
Policy 2			
Policy 3			
Policy 4			
l '			
lotai			
DISABILITY INSURANCE	Œ		
Policy 1			
Policy 2			
Policy 3			
Policy 4			
Total			
LONG-TERM CARE INS	URANCE		
Policy 1			
Policy 2			
Total			
GENERAL INSURANCE			
LIABILITY INSURANCE			
Policy 1			
Policy 2			
Policy 3			
Total			
HOMEOWNER'S INSURANCE	E		
Policy 1			
Policy 2			
Policy 3			
Total			
MEDICAL INSURANCE			
Policy 1			
Policy 2			
Policy 3			
Total			
AUTO INSURANCE			
Policy 1			
Policy 2			
Policy 3			
Total			
OTHER			
Policy 1			
Policy 2			
Policy 3			
Total			

ADDITIONAL NOT	ES
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	WOMEN ROCK™
	WOMEN KOCK
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