



SHERWOOD

Wealth Management

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Sherwood, OR 97140
503.825.6708
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Expense Worksheet

Client Name

Date

Income

Annual

Client Income	\$
Co-Client Income	
Joint Income	
Total	\$

Taxes

Annual

Estimated Payroll Taxes	\$
Estimated State and Local Taxes	
Estimated Federal Income Taxes	
Estimated Property Taxes	
Total	\$

Liabilities

Annual

Mortgage	\$
HELOC	
Auto Loan	
Student Loans	
Credit Cards	
Other _____	
Total	\$

Insurance

Annual

Health Insurance	\$
Auto Insurance	
Life Insurance	
Homeowner's Insurance	
Disability Insurance	
LTC Insurance	
Umbrella Insurance	
Other _____	
Total	\$

Questions? Call 503.825.6708

Expenses	Monthly	Annual
Rent Payments <i>(If Applicable)</i>	\$	\$
Utilities <i>(Gas, Electric, Water, etc...)</i>		
Phone		
Furnishing		
Clothing <i>(Including Jewelry, etc...)</i>		
Gasoline		
Public Transportation		
Groceries		
Dining Out		
Entertainment		
Travel		
Electronics		
Subscription <i>(Amazon, HBO, Netflix, etc...)</i>		
Pets		
Education Expenses		
Prescription Drugs / Medical Supplies		
Personal Care <i>(Haircuts, The Gym, etc...)</i>		
Miscellaneous		
Other #1 _____		
Other #2 _____		
Other #3 _____		
Total	\$	\$

Savings	Annual
Client Employer Plan <i>(401(k), 403(b), TSP, etc...)</i>	\$
Co-Client Employer Plan <i>(401(k), 403(b), TSP, etc...)</i>	
Client Traditional IRA	
Co-Client Traditional IRA	
Client Roth IRA	
Co-Client Roth IRA	
Client Brokerage	
Co-Client Brokerage	
Other _____	
Total	\$

Notes

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