



# SHERWOOD

Wealth Management

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## Expense Worksheet

|                    |
|--------------------|
| <b>Client Name</b> |
| <b>Date</b>        |

| <b>Income</b>    | <b>Annual</b> |
|------------------|---------------|
| Client Income    | \$            |
| Co-Client Income |               |
| Joint Income     |               |
| <b>Total</b>     | <b>\$</b>     |

| <b>Taxes</b>                    | <b>Annual</b> |
|---------------------------------|---------------|
| Estimated Payroll Taxes         | \$            |
| Estimated State and Local Taxes |               |
| Estimated Federal Income Taxes  |               |
| Estimated Property Taxes        |               |
| <b>Total</b>                    | <b>\$</b>     |

| <b>Liabilities</b> | <b>Annual</b> |
|--------------------|---------------|
| Mortgage           | \$            |
| HELOC              |               |
| Auto Loan          |               |
| Student Loans      |               |
| Credit Cards       |               |
| Other _____        |               |
| <b>Total</b>       | <b>\$</b>     |

| <b>Insurance</b>      | <b>Annual</b> |
|-----------------------|---------------|
| Health Insurance      | \$            |
| Auto Insurance        |               |
| Life Insurance        |               |
| Homeowner's Insurance |               |
| Disability Insurance  |               |
| LTC Insurance         |               |
| Umbrella Insurance    |               |
| Other _____           |               |
| <b>Total</b>          | <b>\$</b>     |

**Questions? Call 503.825.6708**

| <b>Expenses</b>                                    | <b>Monthly</b> | <b>Annual</b> |
|--|----------------|---------------|
| 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 _____                                     |                |               |
| <b>Total</b>                                       | <b>\$</b>      | <b>\$</b>     |

| <b>Savings</b>   | <b>Annual</b> |
|--|---------------|
| 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 _____  |               |
| <b>Total</b>   | <b>\$</b>     |

| <b>Notes</b> |  |
|--------------|--|
|              |  |
|              |  |
|              |  |

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