In re	, Case No
Debtor	(if known)
SCHEDULE J - CURRENT EXI	PENDITURES OF INDIVIDUAL DEBTOR(S)
Complete this schedule by estimating the average or projected month weekly, quarterly, semi-annually, or annually to show monthly rate.	y expenses of the debtor and the debtor's family at time case filed. Prorate any payments made b
Check this box if a joint petition is filed and debtor's spouse main	tains a separate household. Complete a separate schedule of expenditures labeled "Spouse."
1. Rent or home mortgage payment (include lot rented for mobile home)	\$
a. Are real estate taxes included? Yes No	
b. Is property insurance included? Yes No	
2. Utilities: a. Electricity and heating fuel	\$
b. Water and sewer	\$
c. Telephone	\$
d. Other	
3. Home maintenance (repairs and upkeep)	\$
4. Food	\$
5. Clothing	\$
6. Laundry and dry cleaning	\$
7. Medical and dental expenses	\$
8. Transportation (not including car payments)	\$
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$
10.Charitable contributions	\$
11.Insurance (not deducted from wages or included in home mortgage pay	
a. Homeowner's or renter's	\$
b. Life	\$
c. Health	\$
d. Auto	\$
e. Other	
12. Taxes (not deducted from wages or included in home mortgage payme	
(Specify)	\$
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list pay	nents to be included in the plan)
a. Auto	\$
b. Other	\$
c. Other	
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your hom	
16. Regular expenses from operation of business, profession, or farm (atta	
17. Other	/
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also o	Comment of Coloridation and
18. AVERAGE MONTHLY EXPENSES (10tal lines 1-17, Report also o if applicable, on the Statistical Summary of Certain Liabilities and Re	
19. Describe any increase or decrease in expenditures reasonably anticipa	

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I

b. Average monthly expenses from Line 18 above

c. Monthly net income (a. minus b.)

Official Form 6J (10/06)

\$_____ \$_____