

Expense Worksheet- Please enter expenses in Monthly column only

Ongoing Expenses		
Expense	Monthly	Annual
Taxes (Variable with Income)		
State	\$	\$
Federal	\$	\$
Local	\$	\$
TOTAL	\$	\$

Home	
Rent or Mortgage	\$ \$
PropertyTax/Insurance	\$ \$
Homeowners/Condo Dues	\$ \$
Electricity	\$ \$
Water/Garbage/Sewage	\$ \$
Telephone	\$ \$
Fuel, Oil, Natural Gas	\$ \$
Repairs and Maintenance	\$ \$
Lawn and Pool Care	\$ \$
Pest Control	\$ \$
Miscellaneous Household Items	\$ \$
Alarms	\$ \$
Cable TV	\$ \$
Service Contracts/ Appliances	\$ \$
Domestic help and FICA	\$ \$
Cell Phone	\$ \$
Internet	\$ \$
TOTAL	\$ \$

Food		
Groceries	\$	\$
Eating Out	\$	\$
Meal Delivery Subscriptions	\$	\$
TOTAL	\$	\$

Ongoing Expenses		
Expense	Monthly	Annual
Personal Living Expens	ses	1
Dry Cleaning and Laundry	\$	\$
Clothing and Shoes	\$	\$
Unreimbursed Medical	\$	\$
Unreimbursed Dental and Vision	\$	\$
Psychiatric/ Psychological Counseling	\$	\$
Drugs, Cosmetics, Toiletries	\$	\$
Personal Grooming	\$	\$
Gifts	\$	\$
Pets (Rx, Food, Pet Sitting, Veterinarian)	\$	\$
Club Dues/ Memberships	\$	\$
Professional Organizations/ Expenses	\$	\$
Sports and Hobbies	\$	\$
Entertainment	\$	\$
Newspapers/ Magazines	\$	\$
Vacations	\$	\$
Religious Organizations/Tithing	\$	\$
Bank Charges / Credit Card Fees	\$	\$
Education Expenses	\$	\$
Postage and Stationery	\$	\$
Accounting Costs	\$	\$
Financial Planner Costs	\$	\$
Attorney Costs	\$	\$
TOTAL	\$	\$

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Ongoing Expenses			
Expense	Monthly	Annual	
Automobile	Automobile		
Car Payment #1	\$	\$	
Car Payment #2	\$	\$	
Gasoline or Electric Charge Costs	\$	\$	
Repairs	\$	\$	
Tags and License Fees	\$	\$	
Auto Insurance	\$	\$	
Tolls/Parking Fees	\$	\$	
AAA	\$	\$	
TOTAL	\$	\$	

Insurances		
Life Insurance	\$	\$
Disability Insurance	\$	\$
Long Term Care Insurance	\$	\$
Health Insurance	\$	\$
Other Insurances (Accident, Medigap, etc.)	\$	\$
Children's Insurance(s)	\$	\$
Dental Insurance	\$	\$
Vision Insurance	\$	\$
TOTAL	\$	\$

Ongoing Expenses		
Expense	Monthly	Annual
Miscellaneous		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
TOTAL DISCRETIONARY	\$	\$
Grand Monthly Total Lifestyle Expenses	\$	\$

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