

Crystal Lake Township

*Complementary Supplement to the State of Michigan Forms 5737 and 5739
to be used specifically for listing of household expenses
(updated March 2022)*

Feel free to use more paper to answer any of the following if more space is needed.

Please list the amounts of household expenses on a **MONTHLY** basis:

House Payment (principal & interest)			
Association/Condo Fees			
Taxes on other property			
Special Assessments			
Home Insurance			
Car Payment 1 st car			
Car Payment 2 nd car			
Auto Insurance			
Health Insurance (include prescription coverage)			
Medical Bills (not covered by insurance)			
Prescriptions (not covered by insurance)			
Child Care/Day Care			
Cable/Satellite			
Phone			
Utilities	Water	Gas	Electric
Internet			
Other (please explain)			

Do you receive assistance or are any of your household expenses paid for by another party? YES NO

If YES, please provide a letter from the party including exactly what is paid, when and how much:

Have your expenses significantly changed in the last year? YES NO

If YES, please explain and include details: