

Home Division Worksheet

Address: _____

Party A: _____ Party B: _____

Date of Preparation: _____ Preparer: _____

| Description of Utilites & Services | Company | Account # | Website / Contact Info | Log In / Password Location | Name on Account | Autopay from ? | Notes |
|--|--------------|-----------|------------------------|----------------------------|-----------------|----------------|-------|
| Home Related Expenses / Utilities | | | | | | | |
| First Mortgage | | | | | | | |
| Second Mortgage / HELOC | | | | | | | |
| Electricity | | | | | | | |
| Gas / Oil | | | | | | | |
| Propane | | | | | | | |
| Water / Sewer | | | | | | | |
| Telephone | | | | | | | |
| Cell Phone | | | | | | | |
| Internet | | | | | | | |
| Cable | | | | | | | |
| Trash | | | | | | | |
| Homeowners Assoc./Condo Fee | | | | | | | |
| Other: | | | | | | | |
| | | | | | | | |
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| Vendors | | | | | | | |
| HVAC Repair | | | | | | | |
| Landscaper / Snow Removal | | | | | | | |
| Electrician | | | | | | | |
| Plumber | | | | | | | |
| Vehicle Maintenance | | | | | | | |
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| Other: | Fence Repair | | | | | | |
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| | | | | | | | |
| Insurance | | | | | | | |
| Home | | | | | | | |
| Auto | | | | | | | |
| Health | | | | | | | |
| Dental | | | | | | | |
| Vision | | | | | | | |
| Life Insurance | | | | | | | |
| Life Insurance | | | | | | | |
| Other: | | | | | | | |
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