

KALAMAZOO COLLEGE®

OFFICE OF FINANCIAL AID

1200 Academy Street, Kalamazoo, MI 49006
269.337.7192 • finaid.kzoo.edu

2024 PARENTAL ANNUAL EXPENSE STATEMENT

Student's Name (please print) _____

In reviewing your student's financial aid application, we find it necessary to gather more information relative to your family's annual expenses during 2024. Please complete the following questionnaire and return it immediately to our office.

Expenses Related to Primary Residence:

Mortgage or rent payment \$ _____ .00/year
Property taxes for home \$ _____ .00/year
Home owners/renters insurance \$ _____ .00/year
Heat/air conditioning \$ _____ .00/year
Electricity \$ _____ .00/year
Water \$ _____ .00/year
Telephone (incl. cell phones) \$ _____ .00/year
Cable \$ _____ .00/year
Trash removal \$ _____ .00/year
Snow removal/lawn care \$ _____ .00/year

Expenses Related to Other Properties Owned:

Mortgage \$ _____ .00/year
Property taxes \$ _____ .00/year
Insurance \$ _____ .00/year

Expenses Related to Transportation:

Car Loan 1 \$ _____ .00/year
Car Loan 2 \$ _____ .00/year
Loans on recreation vehicles (motor home, boat, etc.) \$ _____ .00/year
Insurance for all vehicles \$ _____ .00/year
Trans./maintenance costs (gas, parking, repairs, etc.) \$ _____ .00/year

Other Living Expenses:

Groceries \$ _____ .00/year
Dining out/entertainment \$ _____ .00/year
Out of pocket healthcare \$ _____ .00/year
Healthcare premiums \$ _____ .00/year
Clothing for family \$ _____ .00/year
Fitness/sports/hobbies \$ _____ .00/year

Additional Expenses Not Included Elsewhere: (veterinary care, charitable contributions, vacations, etc.)

\$ _____ .00/year

2024 Income from all sources used to pay above expenses: (please indicate zero if no income from a source)

Parent 1 Wages \$ _____ .00/year
Parent 2 Wages \$ _____ .00/year
Alimony \$ _____ .00/year
Child Support \$ _____ .00/year
Social Security/Pension \$ _____ .00/year
Disability \$ _____ .00/year
Liquidation of savings or investments \$ _____ .00/year

Other Sources:

Type	Amount
_____	\$ _____ .00/year
_____	\$ _____ .00/year
_____	\$ _____ .00/year

Parent's Signature _____

Date _____

Please return by mail, fax or uploading to our [secure site](#):

Kalamazoo College, Office of Financial Aid
1200 Academy Street, Kalamazoo, MI 49006
Fax: 269.337.7390



If you have any questions, please call 269.337.7192 or 800.632.5760.

Thank you for your cooperation.