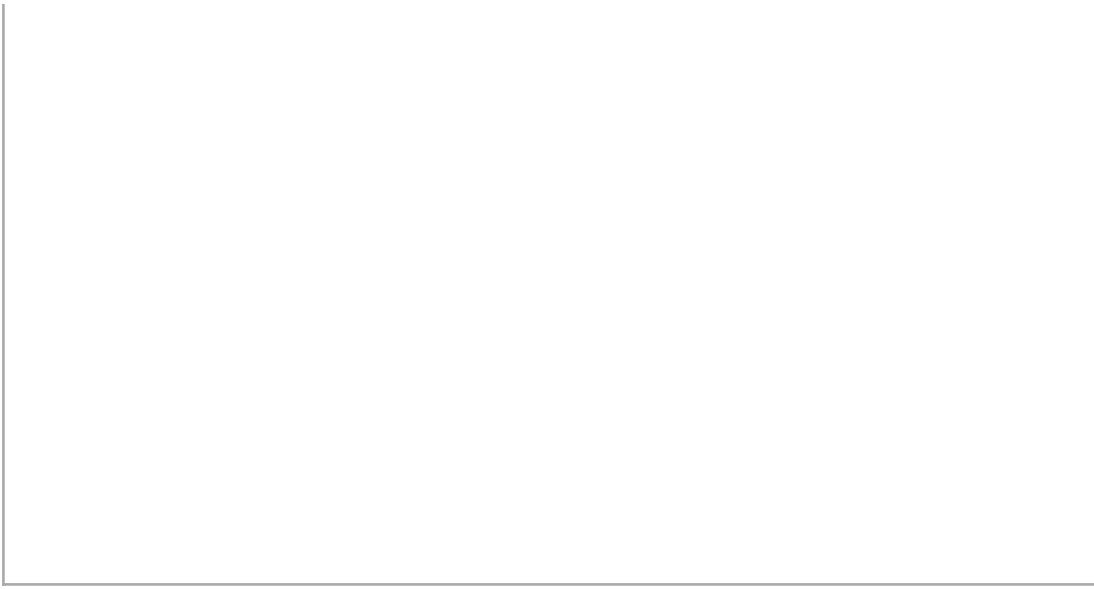


Medical Expense Worksheet	
Expense Paid Description	Total Expense (\$)
Medical/Dental Insurance Premiums Paid	
Doctor, dentist, hospital fees	
Prescription medicine and drugs	
Medical aids (glasses, contacts, hearing aids)	
Medical Transportation- Parking & tolls	
Medical Transportation- Out of pocket expenses	
Medical Transportation- Number of miles driven	
Other qualifying medical expenses	
Total medical expenses	\$0.00



Comments (detail expenses)

