ABSOLUTE ADJUSTING | Additional Living Expense (ALE) Worksheet

Use the same time period for actual and normal costs. Record savings as negative differences. Attach receipts and identify insurer payments.
Do not count the same expense or normal baseline twice. Amounts are subject to policy review. Print more copies as needed.

Insured / preparer: _____ **Claim number:** _____

Date of loss: _____ **Policy number:** _____

Loss address: _____ **As of / period:** _____

Date / service period	Vendor / payee	Expense category	Description / reason	Actual cost ($)	Normal cost for same period ($)	Difference ($)	Reimbursed / paid by insurer ($)	Receipt / reference	Notes / payment status

Page totals: Actual $_____ Normal $_____ Difference $_____ Reimbursed $_____