## • 1. Bring in List of all Bills and Average Monthly Amounts:

| <u>Monthly</u>             | <u>Due</u>  | Usual  | Monthly Amount (Year:) |         |       |       |     |      |      |        |         |         |        |        |
|----------------------------|-------------|--------|------------------------|---------|-------|-------|-----|------|------|--------|---------|---------|--------|--------|
| <u>Expenses</u>            | <u>Date</u> | Amount | Jan                    | Februar | March | April | May | June | July | August | Septemb | October | Novemb | Decemb |
| Rent                       |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Phone                      |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Electrc/H2O/Grbg           |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Cable                      |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Medications                |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Food/Pets                  |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| House/CleanItem            |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
|                            |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Bathroom Items             |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| GroomingItems              |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Clothes/Laundry            |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Transport Costs            |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Newspaper                  |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Hobby/Lesiure/             |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Entertainment<br>Insurance |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Medical/Dental             |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Credit Cards               |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| TOTAL Bills                |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| TOTAL BIIIS                |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| INCOME                     |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
|                            |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Social Security            |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| Other                      |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |
| TOTAL Income               |             |        |                        |         |       |       |     |      |      |        |         |         |        |        |

| <u>Monthly</u>               | <u>Due</u>  | Usual<br>Amount         | Weekly Budget Allowance (Year:) |        |        |        |        |  |  |
|------------------------------|-------------|-------------------------|---------------------------------|--------|--------|--------|--------|--|--|
| <u>Expenses</u>              | <u>Date</u> |                         | Week I                          | Week 2 | Week 3 | Week 4 | Week 5 |  |  |
| Rent                         |             |                         |                                 | ı      | ı      |        |        |  |  |
| Phone                        |             |                         |                                 |        |        |        |        |  |  |
| Electric/Water/Garbage       |             |                         |                                 |        |        |        |        |  |  |
| Cable                        |             |                         |                                 |        |        |        |        |  |  |
| Medications                  |             |                         |                                 |        |        |        |        |  |  |
| Food/Groceries               |             |                         |                                 |        |        |        |        |  |  |
| House/Cleaning Items         |             |                         |                                 |        |        |        |        |  |  |
|                              |             | Included with Groceries |                                 |        |        |        |        |  |  |
|                              |             |                         |                                 |        |        |        |        |  |  |
| BathroomItems                |             |                         |                                 |        |        |        |        |  |  |
| GroomingItems                |             |                         |                                 |        |        |        |        |  |  |
| Clothes/Laundry              |             |                         |                                 |        |        |        |        |  |  |
| <b>Transport Costs</b>       |             |                         |                                 |        |        |        |        |  |  |
| Newspaper                    |             |                         |                                 |        |        |        |        |  |  |
| Hobby/Lesiure/ Entertainment |             |                         |                                 |        |        |        |        |  |  |
| Insurance                    |             |                         |                                 |        |        |        |        |  |  |
| Medical/Dental               |             |                         |                                 |        |        |        |        |  |  |
| Credit Cards                 |             |                         |                                 |        |        |        |        |  |  |
| TOTAL Bills                  |             |                         |                                 |        |        |        |        |  |  |