

# HOUSEHOLD BUDGETING INFORMATION

Please list total MONTHLY expenses and income for ALL household members

Note the amount paid by your for each item after financial assistance

## EXPENSES:

<b>HOUSING</b>	
Rent/Mortgage	\$ _____
Electric	\$ _____
Heat	\$ _____
Water	\$ _____
Telephone	\$ _____
Cable	\$ _____
<b>FOOD &amp; MISCELLANEOUS</b>	
Groceries	\$ _____
Non-Food	\$ _____
Laundry	\$ _____
<b>TRANSPORTATION</b>	
Car Loan	\$ _____
Insurance	\$ _____
Gas	\$ _____
Oil	\$ _____
Repairs	\$ _____
Car Pool	\$ _____
Bus Fare	\$ _____
<b>PERSONAL</b>	
Tobacco Products	\$ _____
Hair Cuts	\$ _____
Clothing	\$ _____
School Supplies	\$ _____
Entertainment	\$ _____
Child Support/Alimony	\$ _____
<b>EMPLOYMENT/EDUCATION COST</b>	
Child Care	\$ _____
Meals Out	\$ _____
Fees/Dues	\$ _____
Loans	\$ _____
Medical/Dental Ins.	\$ _____
<b>MISCELLANEOUS EXPENSES</b>	
Credit Cards	\$ _____
Book Clubs	\$ _____
Loans	\$ _____
Past Bills	\$ _____
Pet Costs	\$ _____
Gifts/Holidays	\$ _____
Other	\$ _____
<b>TOTAL EXPENSES</b>	\$ _____

## INCOME:

Salary/Wages (Gross)	\$ _____
(Multiply Weekly income by 4.33 to determine monthly amount if paid weekly)	
Earned Income Tax	\$ _____
Credit (Average)	_____
TANF	\$ _____
SSA/SSI	\$ _____
UI	\$ _____
VA	\$ _____
WC	\$ _____
Child Support/Alimony	\$ _____
Other	\$ _____
<b>FINANCIAL ASSISTANCE</b>	
Food Stamps	\$ _____
Rental Asst.	\$ _____
Section 8 Utility Allowance	\$ _____
Child Care	\$ _____
Fuel Asst.	\$ _____
WIC	\$ _____
Other	\$ _____
<b><u>TOTAL INCOME</u></b>	\$ _____
<b>TOTAL INCOME</b>	\$ _____
<b>TOTAL EXPENSES</b>	\$ _____
<b>Difference</b>	\$ _____

# NOTES