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| --- | --- | --- | --- | --- | --- |
| Complete the household budget below. | | | | | |
| 1. Make a list of ALL of your household monthly EXPENSES | |  | 1. Add together ALL household   MONTHLY INCOME | | |
| Housing | $ |  | Customer’s Employment | | $ |
| Gas/Oil (Home) | $ |  | Spouse’s Employment | | $ |
| Electric | $ |  | Income from Self-Employment | | $ |
| Telephone/Internet | $ |  | Other Family Employment | | $ |
| Water/Sewer | $ |  | Unemployment Benefits | | $ |
| Garbage | $ |  | Worker’s Compensation | | $ |
| Credit Card Payments | $ |  | S.S.I. | | $ |
| Support Payments | $ |  | TANF (AFDC) | | $ |
| Food | $ |  | Food Stamps (SNAP) | | $ |
| Household Items | $ |  | Retirement | | $ |
| Transportation (ex: gas) | $ |  | Child Support/Alimony (specify) | | $ |
| Child/Family Care | $ |  | Income from Rental Property | | $ |
| Car Payment | $ |  | Dividends from stocks/bonds | | $ |
| Car Insurance | $ |  | Dividends from mutual funds | | $ |
| Medical/Dental | $ |  | Interest from Savings | | $ |
| Cable TV | $ |  | Insurance Settlement Income | | $ |
| Entertainment | $ |  | Other (Specify) | | $ |
| Clothing | $ |  |  | | $ |
| Other (Specify) | $ |  |  | | $ |
| **TOTAL EXPENSES** | $ |  | **TOTAL INCOME** | | $ |
|  | | | | | |
| Signature: | | | | Date: | |