

NAME:

DATE:

MONTHLY BUDGET SHEET

Monthly Income:		Monthly Benefit:	
Salary (Net) 1		LINK	
Salary (Net) 2		TANF	
Salary (Net) 3		SSI	
Child/Alimony Support		SSDI	
Family/Other		SS	
Insurance (STD)		Unemployment	
Insurance (LTD)		VA Benefits	
Workman's Comp		Other	
Checking/Savings			

Basic Need Monthly Expenses:		Transportation Monthly Expenses:	
Rent/Mortgage		Car Payment	
Electricity		Car Insurance	
Gas		Bus/Taxi	
Water/Sewer/Garbage		Gas	
Telephone (landline)		Other	
Cell Phone			

		Family/Individual Monthly Expenses:	
Cable		School Books/Fees	
Internet		Childcare	
Groceries		Child Support	
Meals/Going Out		Other	
Rental Insurance			
Other			

		Personal Care Monthly Expenses:	
Monthly Debt Payment:		Laundry/Dry Cleaning	
Credit Card 1		Laundry Detergent	
Credit Card 2		Feminine Hygiene Products	
Credit Card 3		Toilet Paper, Paper Towels	
Student Loans		Bath Products	
Payday Loans		Haircuts	
Judgement		Toiletries	
IRS		Clothing	
IL State Tax		Diapers/Baby Wipes	
Pet Food		Cleaning Supplies	
Pet Vet Visits		Cigarettes/Alcohol	
Storage Rental		Checking/Savings	
Family Member Debt			

		Medical Monthly Expenses:	
Special Occasions		Medical Co-Pay	
Money Orders		Dental Co-Pay	
Bank Fees		Prescription Co-Pay	
Other		Other	

TOTAL MONTHLY INCOME		TOTAL MONTHLY EXPENSES	
DIFFERENCE			