

**Form #1: Actual/Desired Amounts per Month (xerox as needed)**

	Detail	Totals		Detail	Totals
<b>1. INCOME PER MONTH</b>			<b>11. INSURANCE (not part of payroll deducts)</b>		
<b>Salary (Annual/12)</b>			<b>Life</b>		
Interest (Annual/12)			<b>Medical</b>		
Dividends			Other		
Notes Receivable					
Rental Income			<b>12. DEBT PAYMENTS**</b>		
<b>Alimony</b>			Credit card		
<b>Social Security</b>			Loans & Notes		
Other:			Other		
Less:			<b>13. ENTERTAINMENT + RECREATION</b>		
2. Giving		-	Vacation/Trips*		
<b>3. Taxes (Fed, State, Local, FICA)</b>		-	Eating out		
4. Other Paycheck deductions:		-	Babysitters		
			Other activities		
			Other		
<b>5. NET SPENDABLE INCOME [1-(2+3+4)]:</b>		=	<b>14. CLOTHING*</b>		
			<b>15. MEDICAL (unreimbursable)*</b>		
<b>6. SAVINGS/INVESTMENT*</b>		-	Doctor		
			Dentist		
<b>7. REMAINDER (5-6)</b>		=	Vision		
			Prescriptions		
<b>8. HOUSING:</b>			Other		
<b>Mortgage/Rent</b>					
Homeowners Ins.*			<b>16. SCHOOL/CHILDCARE</b>		
<b>Property taxes*</b>			Tuition*		
Utilities:			Books/Materials*		
Electricity			Activities*		
Gas			Childcare		
Water/Sewer					
Trash			<b>17. MISCELLANEOUS</b>		
Telephone			Beauty/Barber		
Cable/Satellite			Dry cleaning		
Housing maintenance*			Subscriptions*		
Other			Allowances		
<b>9. FOOD/GROCERY STORE</b>			Lunches		
Food			Gifts (incl. Christmas)*		
Toiletry/Cosmetics			Other:		
Laundry					
Pets			<b>18. TOTAL EXPENDITURES</b>		
			(Sum of #8 - #17)		
<b>10. AUTOS/TRANSPORTATION</b>			<b>INCOME VS. EXPENDITURES:</b>		
<b>Payments</b>			Remainder (#7 above)		
Gas + Oil			- Total Expendures (#18 above)	-	
Insurance*			= Excess or (Deficiency)	=	
<b>License/Taxes*</b>					
Maint, Repairs*					
Replacmt fund					
Tolls/Subway, Bus Fare					

Bolded items generally represent fixed or "hard to change" items

\* See Form # 2: Lumpy Expenditures Worksheet

\*\* From Form #3: List of Debts Worksheet