

Household Budget Worksheet

Client Name: _____

Client ID: _____

Housing Case Manager: _____

Budget Period: (Last 30 days)

Total Income:	\$
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Total Expenses:	- \$
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Difference: = \$

Household Expenses								
Housing		Expenses	Need		Insurance		Expenses	Need
Rent or Mortgage					Renter's/Home Owner's			
Electricity					Health			
Gas					Life			
Water, sewer, waste					Vehicle			
Other					Other			
Transportation		Expenses	Need		Personal Care		Expenses	Need
Vehicle payments					Medical			
Bus pass/taxi					Hair/Nails			
Fuel					Clothing			
Maintenance/repairs				Child Care				
Other				Other				
Money Owed		Expenses	Need	Entertainment		Expenses	Need	
Credit				DVDs/CDs				
Loans				Cable/Streaming Service				
Back Taxes				Movies/Concerts				
Other				Sports				
Food		Expenses	Need	Alcohol/Tobacco				
Groceries				Other				
Dining Out				Legal		Expenses	Need	
Other				Attorney				
Pets		Expenses	Need	Alimony				
Food				Child Support				
Veterinary				Liens or Judgements				
Grooming				Probation/Parole				
Other				Other				
Communications		Expenses	Need	Misc		Expenses	Need	
Phone				Gifts and Donations				
Internet				Subscriptions				

[illegible]