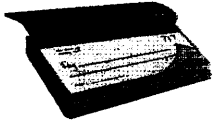


BUDGET

Name: _____

Month/Year: _____

INCOME



checkbook
balance _____



SSI/SS _____



Paycheck _____



Foodstamps _____

Total
Income _____

-Total
Expenses _____

= Total left _____

weekly allowance _____

amount left in
account _____

EXPENSES



Rent _____



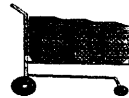
Electricity _____



Phone _____



Cable/TV _____



Groceries _____



Transportation _____



Medical _____



Other _____