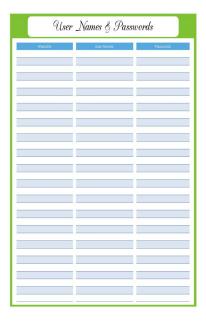
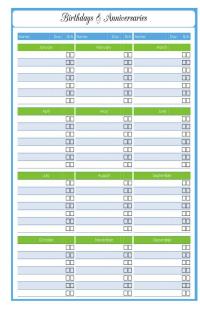


INCOME			
Net Annual Income			
Net Weekly Income	[multiply net income by 26 then + by 52, if		
and the second s	paid bi-weekly)		
CHARITABLE GIFTS			
Church Offering			
Charity	_		
SAVINGS			
Emergency Fund	Home Repairs Fund		
Refirement Fund	Next Car Fund		
College Fund	Other:		
EXPENSES			
HOUSING	PERSONAL		
Mortgage, Taxes & Ins.	Hair Salon		
Other:	Educational Expenses		
UTILITIES	School Supplies		
Electricity & Gas	School Tultion		
Water	Sports/Lessons		
Trash	Gifts (incl. Christmas)		
Cell Phone	Miscellaneous		
Phone	Other:		
Cable	Other:		
Internet	RECREATION		
FOOD & HOUSEHOLD	Babysitter		
Grocery	Entertainment		
Household	Vacation		
Restaurants	TRANSPORTATION		
CLOTHING & SHOES	Car Payment 1		
Children	Car Payment 2		
Adults	Gas & Oil		
MEDICAL/HEALTH	Repairs & Tires		
Disability Insurance	Auto Insurance		
Life Insurance	License & Taxes		
Spouse Life Insurance	_		
Doctor	_		
Dentist Orthodontist	<u> </u>		
	<del>_</del>		
Optometrist Medication	_		
medication	_		







Household Projects			
Project:	Estimated Cost:	Project:	Estimated Cost
32.000			
January	February	March	April
			V-20-00
May	June	July	August
Contour	0.11	No.	B
September	October	November	December