

TEEN MONTHLY EXPENSE WORKSHEET *PLEASE COMPLETE IN PENCIL*



Name	Job	Allowance	TOTAL	For Counselor Use Only	Monthly	Revised
			\$ -	MONTHLY NET INCOME		
			\$ -	MONTHLY EXPENSES		
			\$ -	DEBT PMTS (From pg. 2)		
Net Income:			\$ -	SURPLUS / (DEFICIT)		

	Monthly	Revised		Monthly	Revised
COLLEGE ENTRANCE FEES			HOBBIES		
COLLEGE APPLICATION FEES			EQUIPMENT COST FOR HOBBIE		
STUDENT LOAN			FEES FOR HOBBIE		
RECREATIONAL VEHICLE(MOPED,ETC)			2ND HOBBIE		
			EQUIPMENT COST FOR HOBBIE		
PERSONAL CARE ITEMS			FEES FOR HOBBIE		
HAIR SUPPLIES			3RD HOBBIE		
PERFUME/MENS COLOGNE			EQUIPMENT COST FOR HOBBIE		
MAKEUP			FEES FOR HOBBIE		
DRIVERS LISCENSE					
TEMPS					
DRIVERS ED					
PROBATIONARY LISCENSE			MISCELLANEOUS		
Vehicle 1 Payment			ART SUPPLIES		
Vehicle 2 Payment			BATTERIES		
			ROOM DÉCOR		
Fuel / Maintenance / Insurance			HUNTING EQUIPMENT		
GAS/OIL/CAB FARE/RIDE SERVICES			HUNTING LISCENSE		
REPAIRS/MAINTENANCE			FISHING LISCENSE		
CAR WASH			FISHING EQUIPMENT		
LICENSES/REGISTRATION			Other Child Expenses		
VEHICLE INSURANCE			DIAPERS/SUPPLIES EXPENSE		
			SCHOOL SUPP/ FIELD TRIPS/SPORTS		
Groceries			ALLOWANCES:CHILDREN		
FOOD			SCHOOL / BABY PICS		
CANDY			COLLEGE FUND		
SODA			TUITION/LESSONS/CLUBS		
LAUNDRY					
LUNCHES-SCHOOL/WORK			Clothing / Grooming		
PET FOOD			CLOTHING/SHOES/BOOTS		
			SPORTS EQUIPMENT		
			PROFESSIONAL HAIR CARE		
CLASSES/ CLUBS			PERSONAL CARE ITEMS		
CLASSES (YMCA)			PROM/HOMECOMING/OTHER DANCES		
CLUBS/GROUPS (4H, SCOUTING, ETC)					
			Entertainment		
CELL PHONE			BOOKS/PAPERS/MAGAZINES		
CELL PHONE (COST OF CELL PHONE)			MAJOR HOLIDAYS/OTHER GIFTS/CARDS		
CELL PHONE PLAN COST			CONCERT TICKETS		
			SCHOOL DANCES/SPORTS EVENTS		
Cable / Internet			HEALTH CLUB/YMCA, ETC		
CABLE TV/STREAMING (HULU,NETFLIX,ETC)			MOVIE THEATER		
INTERNET			EATING OUT		
			VACATIONS/SHORT TRIPS		
VIDEO/COMPUTER/OTHER GAMES			GAMBLING/SCRATCH OFFS/ETC.		
			BUY MOVIES/MUSIC		
SAVINGS/DONATIONS			TRADING CARDS		
SAVINGS					
CHURCH/OTHER DONATIONS			GRAND TOTAL OF EXPENSES		

Name: _____

Date: _____ Revised Date: _____