

## Hebrew Free Loan Association Monthly Budget Form

Applicant's name \_\_\_\_\_ Date/\_\_\_/\_\_\_/

ITEM	EXPENSE DESCRIPTION	AMOUNT
1	Groceries & Household Supplies	
2	Medical & Health Insurance	
3	Homeowners Insurance	
4	Automotive Insurance	
5	Life Insurance	
6	Disability Insurance	
7	Automobile Gas	
8	Automobile Repairs	
9	City Taxes	
10	Closing	
11	Child Care	
12	Children's Activities & Allowances	
13	Children's bus fare, school supplies, or lunches	
14	School Tuition	
15	Bus Fare	
16	Adult Spending Money (Lunches, etc.)	
17	Dry-cleaning % Laundry	
18	Dentist & Doctor	
19	Prescription & Medications	
20	Drug Store Items (Including cigarettes)	
21	Hair Care	
22	Gifts	
23	Recreations	
24	Newspapers & Magazines	
25	Contributions (religious or other)	
26	Home Heating Gas	
27	Electricity	
28	Phone Service	
29	Real Estate Taxes	
30	Water	
31	Sewage	
32	Mortgage/Rent	
33	Car Loans	
34	School Loans	
35	Cable TV Service	
36	Other	
37	Other	
38	Other	
	Total Expenses per Month	