

Family Caregiver Budgeting Worksheet for Year: 2011

The following costs are incurred by our family to properly care for _____ and are **not** expected to be reimbursed by any other funding source.

This worksheet will automatically calculate your expected monthly and yearly costs once you enter the monthly quantity and price per unit. If you do not want to budget for 12 months, you can modify the formulas in the 'Expected Annual Cost' columns. At the end of the year, you can enter the actual expenses and the worksheet will autocalculate the difference for you.

Expense Category	Item/Service Description	Monthly Quantity	Price Per Unit	Budgeted Monthly Cost	Expected Annual Cost	Actual Year Cost	(Over Budget) / Under Budget
FAMILY CAREGIVER SUPPORT & EDUCATION							
	Adaptive Equipment and Hearing Aids/Glasses			\$ -	\$ -		\$0.00
	Communication Devices/Software			\$ -	\$ -		\$0.00
	Emergency Response Systems			\$ -	\$ -		\$0.00
	Exam Gloves and Cleaning Supplies			\$ -	\$ -		\$0.00
	Health Devices (portable oxygen, shower chairs...)			\$ -	\$ -		\$0.00
	Incontinence Products & Cleansers			\$ -	\$ -		\$0.00
	Mobility Devices			\$ -	\$ -		\$0.00
	Other			\$ -	\$ -		\$0.00
FAMILY CAREGIVER SUPPORT & EDUCATION							
	Conferences & Workshops			\$ -	\$ -		\$0.00
	Memberships & Subscriptions			\$ -	\$ -		\$0.00
	Other			\$ -	\$ -		\$0.00
HEALTHCARE & OTHER THERAPIES							
	Behavioral Therapy			\$ -	\$ -		\$0.00
	Dental care not covered by insurance			\$ -	\$ -		\$0.00
	Insurance Co-Pays and Deductibles			\$ -	\$ -		\$0.00
	Mental Health Counseling			\$ -	\$ -		\$0.00
	Other Therapies / Treatments			\$ -	\$ -		\$0.00
	Service Animals (incl. food / vet)			\$ -	\$ -		\$0.00
	Social Skills Instruction			\$ -	\$ -		\$0.00
	Therapies (Speech, OT, PT)			\$ -	\$ -		\$0.00
	Other			\$ -	\$ -		\$0.00
CAREGIVING / TUTORING							
	Camps / Social Recreation			\$ -	\$ -		\$0.00
	Developmental Toys			\$ -	\$ -		\$0.00
	Educational Supplies			\$ -	\$ -		\$0.00
	Other In-home care (not reimbursed by IHSS)			\$ -	\$ -		\$0.00
	Respite Care (Budget some time for yourself!)			\$ -	\$ -		\$0.00
	Specialized Daycare / Childcare			\$ -	\$ -		\$0.00
	Tutoring			\$ -	\$ -		\$0.00
	Other			\$ -	\$ -		\$0.00
HOME MODIFICATION & MAINTENANCE							
	Home Repairs (i.e. due to wheelchair / behaviors...)			\$ -	\$ -		\$0.00
	Remodeling for Home Accessibility			\$ -	\$ -		\$0.00
	Specialized Air conditioning / air filtering			\$ -	\$ -		\$0.00
	Other			\$ -	\$ -		\$0.00
MEDICATIONS AND SUPPLEMENTS							
	Prescription co-pays			\$ -	\$ -		\$0.00
	Vitamins / Supplements			\$ -	\$ -		\$0.00
	Other			\$ -	\$ -		\$0.00