

<b>SALES REPRESENTATIVE PLANNING WORKSHEET</b>		<b>Name:</b>	
		<b>Date:</b>	
		<b>Monthly Payment</b>	
<b>I PERSONAL/HOUSEHOLD EXPENSE</b>			\$0.00
	Mortgage/Rent		\$0.00
	Real Estate Tax		\$0.00
	Real Estate Insurance		\$0.00
	Installment Loans (List)		\$0.00
	a. Automobile		\$0.00
	b. Other		\$0.00
	c. Other		\$0.00
	d. Other		\$0.00
	Food		\$0.00
	Clothing		\$0.00
	Laundry, Cleaning		\$0.00
	Electricity		\$0.00
	Heating/Cooling		\$0.00
	Auto Expense (Gas/Oil)		\$0.00
	Auto Insurance		\$0.00
	Life Insurance		\$0.00
	Medical Insurance		\$0.00
	Entertainment		\$0.00
	Personal Care		\$0.00
	Gifts		\$0.00
	Miscellaneous		\$0.00
	Medical Expense (Prescriptions)		\$0.00
	Child Care		\$0.00
	Taxes (Federal/State/SS)		\$0.00
	Other		\$0.00
	Other		\$0.00
	<b>Subtotal Living Expenses</b>		<b>\$0.00</b>
<b>II BUSINESS EXPENSE</b>			\$0.00
	Gas/Oil (Territory Travel)		\$0.00
	Maintenance Auto		\$0.00
	Entertainment		\$0.00
	Supplies		\$0.00
	Postage		\$0.00
	Phone		\$0.00
	Printing		\$0.00
	Miscellaneous		\$0.00
	<b>Subtotal Business Expenses</b>		<b>\$0.00</b>
	<b>Grand Total Expenses</b>		<b>\$0.00 Monthly</b>
<b>III ADDITIONAL INCOME</b>			
	1 _____		
	2 _____		
	3 _____		
<b>IV RECOMMENDATION (To be completed by Area Sales Manager)</b>			
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_____			