

<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>			
_____			
_____			