

Print out and fax to: Fax: 905-707-7895
 OR can be mailed to: Community Credit Counselling Services - York Region
 Attn: Counselor, CCS, Thornhill Square 300 John Street, Suite 300, Thornhill, Ontario,
 L3T 5W4 Phone: 905-707-7695

Name _____ Monthly Budget Worksheet

	Initial	Revised		Initial	Revised
Housing			Living Expenses		
first mortgage			food		
second mortgage			personal travel -gas/transit		
property taxes (mthly)			clothing		
rent/condo fees			alimony & support payments		

Maid/Cleaning _____
 Laundry _____
 Insurance _____
 Other _____ Describe _____

UTILITIES EXPENSES

Electric _____
 Gas _____
 Water _____
 Sewer _____
 Trash _____
 Phone _____

	Telephone	\$
	Insurance (other than car)	\$
	Other (specify)	\$
	Other (specify)	\$

