|  |  |
| --- | --- |
| **Name:**  |  |
|  |
| **\*\*In order to officially change your address you must contact Carol Wilcoxon****352-387-3531\*\*** |
|  |
| **School Enrolled:** |  |
| **Two Current Phone #’s** |  |
| **Email Address:** |  |
| **BUDGET FOR THE MONTH OF** |  |  |
|  |
| Pay Stubs (from the preceding month) |  | **To** |  | **$** |  |
|  |  | **To** |  | **$** |  |
|  |  | **To** |  | **$** |  |
|  |  | **To** |  | **$** |  |
|  |
| **MONEY EARNED** |  |  |  |  |
|  |
| Amount Received from work |  |  | **$** |  |
| Amount Received from SSI |  | **+** | **$** |  |
| Amount Received from IL |  | **+** | **$** |  |
| Other: Financial Aid, etc. |  | **+** | **$** |  |
| Total Earned: |  | **=** | **$** |  |
|  |
| **All items noted below with \*\* (asterisks) require receipts to accompany the budget sheet** |
|  |
| **MONEY SPENT** |  |
|  |
| **\*\***Rent**\*\*** |  | **$** |  |
| **\*\***Electricity**\*\*** | **+** | **$** |  |
| Phone | **+** | **$** |  |
| **\*\***Transportation (car payment, insurance, gas, etc.)**\*\*** | **+** | **$** |  |
| **\*\***Food (groceries)**\*\*** | **+** | **$** |  |
| Fast Food | **+** | **$** |  |
| **\*\***Savings (at least 10% of money earned)**\*\*** | **+** | **$** |  |
| **\*\***Clothing**\*\*** | **+** | **$** |  |
| Personal Hygiene & Apt. Maintenance | **+** | **$** |  |
| **\*\***Other:  |  | **+** | **$** |  |
|  |  | **+** | **$** |  |
|  |  | **+** | **$** |  |
| **Total Spent** |  | **=** | **$** |  |
|  |
| TOTAL EARNED |  | **$** |  |
| MINUS TOTAL SPENT  | **-** | **$** |  |
| EQUALS | **=** | **$** |  |