Expenses for Week _____ to _____

DATE	Housing & Utilities	Phone	Consumer Credit	Child Care	Food	Clothing	House-hold Costs	Medical & Insurance	Education	Trans-portation	Entertain-ment	Personal	Contribu-tions & Gifts	Savings
Mon.														
Tues.														
Wed.														
Thurs.														
Fri.														
Sat.														
Sun.														
TOTAL														