

## Columbia College MONTHLY HOUSEHOLD BUDGET

Please base this budget on your family's current monthly expenses and income. Receipts and documentation may be requested to support your budget numbers.

Name:

Advisor's Name:

<b>Household Income</b>	
Monthly Net Salary (self)	
Monthly Net Salary (spouse)	
Self-Employment (self)	
Self-Employment (spouse)	
EI Benefits (self)	
EI Benefits (spouse)	
Alimony	
Child Support	
Rental Income	
Child Tax Benefits	
Other Income (pension, WCB)	
<b>Total:</b>	
<b>Assets</b>	
Property Investments	
Savings	
<b>Total:</b>	
<b>Expenses</b>	
<b>Shelter / Housing</b>	
Mortgage/Rent	
Condo Fees	
Property Tax	
Home Insurance	
<b>Total:</b>	
<b>Utilities</b>	
Electricity	
Water	
Gas/Heat	
<b>Total:</b>	

<b>Expenses Continued</b>	
<b>Food</b>	
Groceries	
Special Needs Diet	
<b>Total:</b>	
<b>Medical Costs</b>	
Blue Cross	
Monthly Prescriptions	
<b>Total:</b>	
<b>Transportation</b>	
Public Bus Pass(es)	
Car Payment/Lease	
Car Insurance	
Gas per month	
Other	
<b>Total:</b>	
<b>Miscellaneous</b>	
Clothing	
Recreation	
Cellular Phone(s)	
Cable	
Internet	
Home Phone	
<b>Total:</b>	
<b>Debt (minimum monthly payment)</b>	
Student Loan	
Credit Cards	
Other	
<b>Total:</b>	

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I verify that the monthly totals above are accurate and correct to the best of my knowledge.

Client's Signature:

Date: