

Income & Expense Statement - Print and fill in by hand or save to your computer and fill in using the Free Adobe Reader.

**NAME:** \_\_\_\_\_  
**MONTH:** \_\_\_\_\_  
**NUMBER OF PEOPLE IN HOUSEHOLD:** \_\_\_\_\_

**INCOME OR OTHER MONIES RECEIVED DURING MONTH**

<b>YOU</b>		<b>SPOUSE</b>	
Take home pay	_____	Take-home pay	_____
Commissions	_____	Commissions	_____
Support/Alimony	_____	Support/Alimony	_____
Child Benefit/Family Allowance	_____	Child Benefit/Family Allowance	_____
E.I. Benefits	_____	E.I. Benefits	_____
Social Assistance	_____	Social Assistance	_____
Pension	_____	Pension	_____
Rental income	_____	Rental income	_____
Interest/Dividends	_____	Interest/Dividends	_____
W.C.B. Benefits	_____	W.C.B. Benefits	_____
Net Self-employment income	_____	Net Self-employment income	_____
<b>(A)YOUR TOTAL INCOME</b>	<b>_____</b>	<b>(B)SPOUSE'S TOTAL INCOME</b>	<b>_____</b>
		<b>(A+B) TOTAL FAMILY INCOME</b>	
		Help From Family	_____

**NON-DISCRETIONARY EXPENSES - RECEIPTS OR OTHER PROOF REQUIRED**

Child Support	_____		
Spousal Support	_____		
Child Care	_____		
Medical Expenses	_____	<b>TOTAL</b>	

**DISCRETIONARY HOUSEHOLD EXPENSES**

Rent/Mortgage	_____	Entertainment	_____
Property Tax	_____	Gifts	_____
Household Insurance	_____	Tobacco	_____
Home Repairs	_____	Alcohol	_____
Hydro	_____	Clothing	_____
Heating (gas/oil)	_____	Laundry, Etc.	_____
Water	_____	Grooming	_____
Cable TV/Internet	_____	Vacations	_____
Telephone	_____	Pet Care	_____
Food	_____	Education/Training	_____
Life Insurance	_____		
Home Insurance	_____		
Car Insurance	_____		
Car Payment	_____		
Car Exp. (gas/oil)	_____	<b>TOTAL EXPENSES:</b>	
Parking	_____		
Public Transportation	_____		
Car Exp. (repairs)	_____		

**Address:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Employer:**  
 \_\_\_\_\_