

# WESTERN DAIRYLAND EOC, INC.

Serving the Counties of Eau Claire, Jackson, Buffalo & Trempealeau

## *Work-n-Wheels*

### *Financial Worksheet*

Name: \_\_\_\_\_

Date: \_\_\_\_\_

County: \_\_\_\_\_

MONTHLY INCOME	HOW OFTEN PAID	GROSS PAY	NET PER CHECK	MONTHLY NET INCOME
Salary/Wages #1:				
Salary/Wages #2:				
Other Income: such as				
Child support, etc.				
			<b>TOTAL</b>	

MONTHLY FIXED EXPENSES	CURRENT SPENDING MONTHLY
<b>Housing:</b>	
• Rent/Mortgage Payment	
• 2 <sup>nd</sup> Mortgage/Home Equity Loan/Lot Rent	
• Electricity/Heat (oil, gas, LP, wood)	
• Telephone/Cell Phone/Pager	
• Cable/Satellite/Internet	
• Water/Sewer/Trash	
• Property Taxes (if not in mortgage escrow)	
• Homeowners Insurance/Renters Insurance	
• Home Repair/Maintenance/Water Soften	
<b>TOTAL</b>	

<b>Transportation:</b>	
• Car Payment #1	
• Car Payment #2	
• Auto Insurance	
• Auto Maintenance Repair	
• License Tabs	
<b>TOTAL</b>	

<b>Miscellaneous:</b>	
• Clothing Purchases (back to school/special trips/sprees)	
• Insurance (Health/Life)	
• Medical Expenses (copays/deductible/chiro/prescriptions)	
• Day Care/Pre-school/Private School	
• Tuition/Supplies/Lessons	
• Membership Fees/Health Club	
• Income Taxes (payment plan/self employed)	
• Union Dues/Investments/Savings/Bank Fees	
• Gifts/Birthdays/Holidays/Parties	
• Vacation/Travel	
• Other:	
<b>TOTAL</b>	

<b>MONTHLY FLEXIBLE EXPENSES</b>	<b>CURRENT SPENDING</b> (Monthly Average)	
What do you spend monthly for the following: (out-of-pocket, day-to-day spending)		
• Gasoline – gas, taxi, ride-share, bus, parking		
• Food – groceries, dining out, work lunches, school lunches and convenience foods		
• Household supplies – baby supplies, paper products, laundry, clothes, discount retail stores		
• Cash & Miscellaneous – allowances, postage, donations, tobacco, alcohol, pet supplies		
• Entertainment – baby sitters, movies, gambling, sports, hobbies, books, magazines and FUN!		
• Other:		
<b>TOTAL</b>		

<b>CREDITORS: Credit cards, Personal loans, family debts, medical bills, old taxes, miscellaneous</b>	<b>BALANCE</b>	<b>CURRENT MONTHLY PAYMENT</b>
<b>TOTAL</b>		

**Participant Action Plan / Summary**

Monthly Net Income: *(from top of page 1)*      \$ \_\_\_\_\_      \$ \_\_\_\_\_

Current Spending

Planned spending

**Monthly Fixed Expenses:**

*Total Housing Expenses from page 1*      \$ \_\_\_\_\_      \$ \_\_\_\_\_

*Total Transportation Expenses (page 1)*      \$ \_\_\_\_\_      \$ \_\_\_\_\_

*Total Miscellaneous Expenses (page 1)*      \$ \_\_\_\_\_      \$ \_\_\_\_\_

*Monthly Flexible Expenses ( page 2)*      \$ \_\_\_\_\_      \$ \_\_\_\_\_

*Creditors: From page 2*      \$ \_\_\_\_\_      \$ \_\_\_\_\_

**TOTAL MONTHLY EXPENSES:**      \$ \_\_\_\_\_      \$ \_\_\_\_\_

Surplus/Deficit:      \$ \_\_\_\_\_      \$ \_\_\_\_\_

(monthly income - monthly expenses)

Notes / Decision: