WEEKLY SPENDING PLANNER

NET INCOME *(fill in paydays)*				
LIVING EXPENSES	**1**	**2**	**3**	**4**
Rent, mortgage				
Property Taxes				
Heat				
Hydro and Water				
Telephone				
Life Insurance				
Residential Insurance				
House Maintenance and Repairs				
Income tax & CPP on self-employed income				
Child Care				
Spousal or Child Support				
Groceries				
Clothing				
Laundry & Dry Cleaning				
Cable TV				
Car lease or payment				
Car Gas and Oil				
Car Repairs				
Car Insurance				
Public Transportation				
Medical Insurance				
Dentist				
Prescriptions				
Meals eaten outside home				
Tobacco and/or alcohol				
Entertainment				
Donations - church, etc.				
Gifts, holidays, etc.				
Barber/Hairdresser				
Newspapers/magazines/other minor payments				
School and Sport Supplies				
Payment to estate				
Others (*describe)*				
Total Monthly Expenses				
MONEY AVAILABLE FOR SAVINGS				