**Appendix ‘A’**

**FINANCIAL INVENTORY WORKSHEET**

Name:……………………………………………………………………………………………………….

Employment/Business Status:…..………………………………………………………………………

Children/Child:………………………………………………………………………………...................

Dependents

Do you have a family member(s) that are financially dependent upon you or could be in the future? (i.e. parents, grandparents, siblings, etc.) Yes……………..No…………………………..

**Monthly Income**

How much do you earn monthly?.................................................................................................

1. Salary or from business earnings……………..………………………………………………
2. Allowance………………………………………………………………………………………….
3. Pocket money from parents/relative, etc.)……………………………………………………
4. Others………………………………………………………………………………………………

**Total = $……………………**

**Monthly Expenditure**

How much do you spend monthly?................................................................................................

1. Rent…………………………………………………………………………………………………
2. Utilities…………………………………………………………………………………………….
3. Transportation……………………………………………………………………………………
4. Repairs……………………………………………………………………………………………..
5. Groceries…………………………………………………………………………….....................
6. Food outside home………………………………………………………………………………..
7. Food at home………………………………………………………………………………………
8. Clothing……………………………………………………………………………………………
9. Cleaning……………………………………………………………………………………………
10. Cosmetics…………………………………………………………………………………………..
11. Church support…………………………………………………………………….....................
12. Entertainment…………………………………………………………………………………….
13. Health care………………………………………………………………………………………...
14. Gift………………………………………………………………………………………………….
15. Dependents ……………………………………………………………………………………….
16. Others (you may add more)…………………………………………………………………...

**Total = $………………………………..**

* **Net Income (**MonthlyIncome – Monthly Expenditure**)** **$**……………………...