



_____ 's Monthly Spending

	Month One	Month Two	Month Three	Month Four
Recurring Bills				
Electricity				
Gas				
Water				
Trash				
Cable/Internet				
Mobile Phone				
Student Loan				
Credit Card Pmt(s)				
Car Payment				
Vehicle Insurance				
Rent/Mortgage				
Rent/Home Ins.				
Gym Membership				
Health Insurance				
General Spending				
Groceries				
Clothes				
Dining Out				
Entertainment				
Alcohol				
Gifts				
Maintenance				



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