Name_____

Personal Management and Family Life **Budget**

90-Day Budgeted Spending and Planned Chores

		Budgeted Income								Budgeted Expenses						Budget	Budgeted Savings		Total	Cash
Date	Planned Chores	Allowance	Clothing	Cleaning	Entertain.	Jobs	Gifts	Other	Total	Clothing	Entertain.	Gifts	Other	Total		Inc. - Exp.	Deposited	Withdrawn	Cash Flow	Balance
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Personal Management and Family Life

90-Day Budgeted Spending and Planned Chores

Budget

		Budgeted Income								Budgeted Expenses						Budget	Budgeted Savings		Total	Cash
Date	Planned Chores	Allowance	Clothing	Cleaning	Entertain.	Jobs	Gifts	Other	Total	Clothing	Entertain.	Gifts	Other	Total		Inc. - Exp.	Deposited	Withdrawn	Cash Flow	Balance
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Personal Management and Family Life **Budget**

90-Day Budgeted Spending and Planned Chores

		Budgeted Income								Budgeted Expenses					Budget	Budgeted Savings		Total	Cash
Date	Planned Chores	Allowance	Clothing	Cleaning	Entertain.	Jobs	Gifts	Other	Total	Clothing	Entertain.	Gifts	Other	Total	Inc. - Exp.	Deposited	Withdrawn	Cash Flow	Balance
75																			
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77																			
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