

Your Name: _____ Date: _____

Gathering Your Bills

Next week, we'll be creating a calendar of when your bills are due.

This week, please take a look through your statements or gather up all your regular bills so that you'll be able to complete the calendar. If you're not yet paying rent and other housing-related bills, don't worry: when we create a spending plan we'll make realistic estimates for those amounts.

Here is a list to jog your memory. You may not have bills in each of these categories, and you may have bills that don't appear on the list.

- | | | |
|-------------------------------------------------------------|---------------|-----------------|
| <input type="checkbox"/> Rent (if applicable) | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Utilities (if applicable) | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Phone | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Trash (if applicable) | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Water and Sewer (if applicable) | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Credit Cards | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Child Support | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Cable and Internet (if applicable) | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Gym fees | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Student loans | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Court-related bills | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Car loans | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Other loans | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Other bills | Amount: _____ | Due Date: _____ |
| <input type="checkbox"/> Other bills | Amount: _____ | Due Date: _____ |