MONTH _____ Youth Budget Code name _____

	Income					Expense							
Date	Allow ance	Take-Home Salary	Gifts	Other	**Total**	Food	Entertain ment	Clothing	Cell	Other	Charity / Church	Savings	**Total**
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
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26													
27													
28													
29													
30													
31													
Totals													