

Policy and Procedure Concerning Financial Resources of Persons Served
Appendix G

| INCOME AND EXPENSE WORKSHEET | | | | | | | | | | | |
|-------------------------------------|--------|--------|--------|--------|--------|-------------------|--------|--------|--------|--------|--------|
| Name: _____ | | | | | | Month/Year: _____ | | | | | |
| Income | | | | | | | | | | | |
| Date | Source | Amount | Date | Source | Amount | Date | Source | Amount | Date | Source | Amount |
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| | | | | | | | | | | | |
| Total: | | | Total: | | | Total: | | | Total: | | |

| Expenses | | | | | | | |
|-----------------|---------|--------------|-----------|---------------------|----------|------------|-------|
| Check # | Paid to | Total Amount | Groceries | Personal Care Items | Clothing | Petty Cash | Other |
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| Totals: | | | | | | | |