



Deschutes County Juvenile Community Justice
Emancipation Budget

YOUR MONTHLY EXPENSES

RESIDENCE

Rent or mortgage payment \$ _____

UTILITIES

Heat (oil/gas/wood/electric) \$ _____

Water \$ _____

Telephone \$ _____

Garbage Service \$ _____

TV Cable \$ _____

HOUSEHOLD EXPENSES

Groceries \$ _____

Other household items \$ _____

School food costs \$ _____

Other meals eaten out of home \$ _____

Medicine & pharmaceuticals \$ _____

Clothing & shoes \$ _____

Personal hygiene products \$ _____

TRANSPORTATION

Car payments \$ _____

Gas & Oil \$ _____

INSURANCE

Car \$ _____

Medical \$ _____

Life \$ _____

MISCELLANEOUS

Entertainment \$ _____

OTHER EXPENSES

(specify purpose)

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

OTHER DEBTS NOT LISTED ABOVE

(includes charge accounts, purchase agreements and any other debts)

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL MONTHLY LIVING EXPENSES

\$ _____

TOTAL MONTHLY INCOME

\$ _____

SAVINGS ACCOUNT BALANCE

\$ _____

CHECKING ACCOUNT BALANCE

\$ _____