Army Emergency Relief (AER) Budget Sheet	Army Fr	mergency	Relief	(AFR)	Budget Sheet
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NAME:				Client ID:

Instructions: Use monthly averages for your income and expenses. Do not use current amounts due as this may not accurately reflect your budget. If you are in transtion to medical retirement - use projected income as provided by PEBLO.

1	MONTHLY INCOME		AMOUNT	2	MONTHLY EXPENSES	AMOUNT
	Service Member's Income				Food	
	Military/Retired Pay (DFAS)				Rent	
	VA Disability	<del>,                                    </del>			Mortgage	
	Civilian Salary/Earnings	<del>,                                    </del>			Utilities:	
	CRSC				Electric	
	Social Security Disability				Water/Sewer	
	Social Security Retirement			1 [	Cable	
	GI Bill	<del></del>			Internet	
	VOCREHAB	<del></del>		1 [	Home Heating Oil/Gas	
	Child Support	<del></del>			Home Phone	
	Spouse's Income:				Trash	
	Social Security	<del></del>		1 [	Cell Phone	1
	Social Security Social Security Disability	<del></del>	<del>                                     </del>	1 [	Vehicle Expenses:	<del> </del>
	Caretaker Stipend	<del></del>	<del></del>	1 [	Fuel	<del> </del>
	Dependency and Indemnity Comp (DIC)	<del></del>	<del></del>	1 [	Maintenance	<del>                                     </del>
	Child Support	<del></del>	<del></del>	1 I	Payment - Vehicle 1	<del>                                     </del>
	SBP	<del></del>	<del></del>	1 I	Payment - Vehicle 2	<del>                                     </del>
	VA Widow Tax Pension	<del></del>	<del></del>	1 [	Meals Eating Out	<del>                                     </del>
	Dependent Children Income:	<b>——</b>		1	Recreation	<del> </del>
	Civilian Salary/Earnings	1		1 [	Church/Charity	
	Social Security	<del></del>	<del></del>	1 [	Clothing	<del> </del>
	GI Bill	<del></del>	<del></del>	1 [	Incidentals/Supplies	<del> </del>
	Caretaker Stipend	<del></del>	<del></del>	1	Insurance:	<del> </del>
	Other Income:	<u> </u>		1 [	Life	<del>                                     </del>
	Help from other family members			1	Vehicle	†
	Rental Property Income	<del></del>	<del></del>	1	Renter's/Home	<del>                                     </del>
	Investment Income	ι	<del></del>	1	Health Insurance	<del> </del>
		<b>!</b>	<del></del>	1	Dental Insurance	†
	Food Stamps WIC	<b>!</b>	<del></del>	1	Child Care	†
	Other:	<b></b>	<del></del>	1		<del> </del>
		<b></b>	<del>                                     </del>	1	Child Support (Payments)	+
	Other:		<b></b>	1	Child Support (Payments)	+
	Notes:		_		Medical Bills	
					Dental Bills	
					Garnishment	
					Investments:	
					TSP/IRA	
					Mutual Funds/Stocks	
					Savings	
					Other	
					Credit Cards:	
					Card #1	1
					Card #2	
						<del>                                     </del>
					Card #3	<del> </del>
					Personal Loans:	+
					Loan #1	<b>_</b>
					Loan #2	
					Loan #3	
					Student Loan	
					Taxes:	
					Federal Income tax	
					State Income tax	
					Medicare	†
					Social Security	+
						<del>                                     </del>
				1	Other Taxes (City/Local)	<u> </u>
_	TOTAL INICONAL	i	1		Other:	1
1	TOTAL INCOME	i	1		Other:	
					Other:	
		1	·			
2	TOTAL EXPENSES	1 - 1	1		TOTAL	
		<b></b>		1		
1 _ 7	DALANCE C: .	=	<u> </u>			
3	BALANCE Circle one ( + or - )	η - ,	1			