



**J. Arthur Trudeau Memorial Center**  
*"Linking lives through family and community"*

**Shared Living Program**  
**Monthly Personal Needs Funds Analysis**

Individual's name: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

Beginning Checking Account balance (Same as last month's ending balance) \$ \_\_\_\_\_

Income this month:

<b>SSI</b>	\$ _____
<b>Other Gov't Benefits</b>	\$ _____
<b>Employment</b>	\$ _____
<b>Other (transfer from Savings, Bonus, etc)</b>	\$ _____

**(Total income received)** \$ \_\_\_\_\_

Expenses this month: (Receipts required \$10 and over)

<b>Room and Board</b>	\$ _____
<b>Additional in home contributions</b>	\$ _____
<b>Personal Needs:</b>	
<b>Cash in Pocket</b>	\$ _____
<b>Out to eat</b>	\$ _____
<b>Medical Co-Pays</b>	\$ _____
<b>Recreational</b>	\$ _____
<b>Other (over \$10)</b>	\$ _____

**Total expenses under \$10 (without receipts)** \$ \_\_\_\_\_

**(Total expenses this month)** \$ \_\_\_\_\_

Ending Checking Account balance \$ \_\_\_\_\_  
 (Beginning balance + Total Income - Total Expenses)

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Beginning Savings Account balance (same as last month's ending balance) \$ \_\_\_\_\_

<b>Withdrawals</b>	\$ _____
<b>Transfers to Checking</b>	\$ _____

Ending Savings Account balance \$ \_\_\_\_\_

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End of month cash balance (total income Checking and Savings) \$ \_\_\_\_\_

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Beginning SNAP balance (same as last month's ending balance) \$ \_\_\_\_\_

Deposit \$ \_\_\_\_\_

Withdrawal totals \$ \_\_\_\_\_

Ending SNAP balance \$ \_\_\_\_\_

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I hereby certify that the amounts herein are accurate, that all monthly income and expenses of the individual named above are reported in this analysis, and that all expenses reported for the individual are directly beneficial to him/her. Further, I certify that there is documentation available for all income and expense items over \$10.00 and that this data is sent to the Shared Living office along with bank statements on a monthly basis; receipts for all purchases must be included.

\_\_\_\_\_  
Signature of Home Contractor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Reviewed by Shared Living Specialist

\_\_\_\_\_  
Date