



Army Emergency Relief (AER) Budget Sheet

Name: _____ Date: _____

SSN or Client ID: _____ Phone (home): _____ Phone (work): _____

MONTHLY EXPENDITURES		AMOUNT	MONTHLY INCOME	AMOUNT
1	Food		Military/Retired Pay	
2	Rent or Mortgage		Civilian Earnings	
3a	Utilities - Electric		Spouse's Earnings	
3b	Utilities - Heat - Gas/Coal		Social Security Ret (SM/Spouse)	
3c	Phone/TV/Cable		Social Security Dis (SM/Spouse)	
4	Water/Sewer/Garbage		Supplemental Social Security	
5	Clothing		VA Disability	
6	Incidentals/Supplies		Other Earnings	
7	Dental/Medical		Help from Family Members	
8	Transportation		Income: Investments	
9	Recreation & Church		Income: Food Stamps	
10a	Insurance - Life		Income: Other	
10b	Insurance - Health		TOTAL MONTHLY INCOME	
10c	Insurance - Car			
11	Child Care		ASSETS	
12a	Other		Investments/Savings/CD	
12b	Other		Real Estate	
13	Total Monthly Debt Pymts from 14b		Other (specify)	
TOTAL MONTHLY EXPENDITURES			TOTAL ASSETS	

14a INDEBTEDNESS							
CREDITOR	DATE INCURRED	ORIGINAL AMOUNT	PURPOSE	MONTHLY PYMT	DATE LAST PYMT	BALANCE DUE	DATE VERIFIED
(Continue indebtedness on reverse if necessary.)				14b TOTAL MONTHLY PAYMENTS		14c TOTAL DUE	

DEDUCTIONS FROM SM'S PAY		ITEM	AMOUNT
		Fed Income Tax	
		Social Security (FICA)	
		Medicare	
		State Income Tax	
		Insurance (SGLI/TSGLI/Navy Home/FSGLI)	
		Dental Plan	
		Child Support	
		TOTAL DEDUCTIONS	

ITEM	AMOUNT
TSP	
Garnishment	
Other	
Other Allotment 1	
Other Allotment 2	
Other Allotment 3	
Other Allotment 4	
TOTAL DEDUCTIONS	

TOTAL MONTHLY EXPENDITURES	
TOTAL MONTHLY INCOME	
BALANCE (+ OR -)	

SIGNATURE OF APPLICANT

DATE SIGNED