Spending Pla	an for Nam	e:		Mon	th:	Year:	Page 1
Category:							
Budget Amount:							
Rollover:							
Beginning Balance:							
Check #							

Spending Pl	an for I	Name:			Month:		Year:		Page 2	
Category:	Category:	Category:	Category:	Cate	gory:	Category:	Category:	Category:		
Budget Amount:	Budget Amount:	Budget Amount:	Budget Amount:	Bud		Budget Amount:	Budget Amount:	Budget Amount:		
Rollover:	Rollover:	Rollover:	Rollover:	Rolle	over:	Rollover:	Rollover:	Rollover:		
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Check #	Check #	Check #	Check #	Che	ck#	Check #	Check #	Check #		
Category:	Category:	Category:	Category:	Cate	gory:	Category:	Category:	Category:	Category:	
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Rollover:	Rollover:	Rollover:	Rollover:	Rolle	over:	Rollover:	Rollover:	Rollover:		
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