WEEKLY BILLS

Please fill in what you think each costs:

|  |  |  |  |
| --- | --- | --- | --- |
| Bills / Item | Single person | Couple or Parent & 1 child | Family (2 children) |
| Electricity / Gas – summer |  |  |  |
| Electricity / Gas – mid winter – if at home daytime |  |  |  |
| Water – metered |  |  |  |
| TV Licence |  |  |  |
| Rent |  |  |  |
| Weekly shop |  |  |  |
| Clothing/Shoes |  |  |  |
| Mobile phone / telephone |  |  |  |
| Laundry (washed at local laundrette) |  |  |  |
| Travel |  |  |  |
| Council Tax |  |  |  |