

CHILDCARE COSTS MONITORING CHART

Child Name:

Month/Year:

Provider:

EXPENSE CATEGORY	DATE DUE	BUDGETED	ACTUAL AMOUNT	STATUS / REF #
Tuition / Base Fee				
Registration/Admin				
Meals/Nutrition				
Supplies (Diapers/Wipes)				
Activities/Field Trips				
Late Pickup Fees				
Transportation				
Other:				
MONTHLY TOTALS		\$	\$	

NOTES & OBSERVATIONS (TAX CREDITS, SUBSIDIES, OR CHANGES)