

Monthly Budget Worksheet

INCOME

Salary A _____
Salary B _____
Other _____

Total Income _____

(LESS)

Tithe/ Charity _____
Taxes (Fed/St) _____

Net Spendable Income _____

EXPENSES

HOUSING

Mortgage/Rent _____
Utilities (H2O, Gas) _____
Telephone _____
Cable TV _____
Internet _____

Housing Total _____

AUTO/GAS

Auto Payment(s) _____
Insurance _____
Gas, Maint. _____

Auto/Gas Total _____

LIFESTYLE

Cell Phone(s) _____
Groceries _____
Beauty/Barber _____
Vacation _____
Clothing _____
Entertainment _____

Lifestyle Total _____

MEDICAL/ HEALTH

Life Insurance _____
Health Insurance _____
Doctor/Dentist _____
Prescriptions _____

Medical/Health Total _____

OTHER

Savings _____
Investments _____
Credit Card(s) _____
Loans/ Other _____

Other Total _____

Total Expenses _____

BALANCE

(Net Spendable Income - Total Expenses) _____