

MONTHLY BUDGET

Name: _____

Date: _____

ESSENTIAL EXPENSES (60%)

Housing

Mortgage/Rent	\$
Property Taxes	\$
Home Maintenance	\$
Homeowner's/ Renter's Insurance	\$
Utilities (Electronic, Gas, Water, etc.)	\$
	\$

Transportation

Auto Payment(s)	\$
Auto Insurance	\$
Gas	\$
Maintenance/License	\$
Parking/Tolls/Bus/Train	\$
	\$

Personal Loans

Student Loans	\$
Credit Card Debt	\$
	\$

Health Care/Insurance

(Not deducted from paycheck)

Health Insurance	\$
Life Insurance	\$
Disability Income Insurance	\$
Long-term Care Ins.	\$
Medical / Dental / Drugs	\$
	\$

Household/Personal

Groceries	\$
Personal Care	\$
Clothing/Dry Cleaning	\$
Professional Dues	\$
Cell Phone	\$
	\$

Children

Dependant/Child Care	\$
Education/School	\$
	\$

**Essential
Expenses Subtotal** \$ _____

DISCRETIONARY EXPENSES (20%)

Cable/Phone/Internet	\$
Dining Out	\$
Recreation/Club Dues	\$
Movies/Sporting Events	\$
Hobbies	\$
Vacation/Travel	\$
Gifts/Contributions	\$
	\$
	\$
	\$
	\$

**Discretionary
Expenses Subtotal** \$ _____

SAVING & INVESTING (20%)

Emergency Fund	\$
College Savings	\$
Short/Mid-Term Needs	\$
Retirement Savings	\$
	\$
	\$

**Saving &
Investing Subtotal** \$ _____

TOTAL MONTHLY EXPENSES \$ _____

NET MONTHLY INCOME \$ _____

LESS EXPENSES \$ _____

TOTAL SURPLUS/DEFICIT \$ _____