

Budget

MONTHLY INCOME		TOTAL
Income 1	\$	\$
Income 2	\$	
Child Support/ Alimony	\$	
Other	\$	

Recommended 5-10% of net income

SAVINGS		TOTAL
Emergency	\$	\$
Other	\$	
Other	\$	

Recommended 0-10% of net income

TOTAL	DEBT	
\$	MONTHLY PAYMENT	TOTAL LOAN
Credit Card -----	\$	\$
Credit Card -----	\$	\$
Car	\$	\$
House	\$	\$
Other	\$	\$

Recommended 25-38% of net income

HOUSING		TOTAL
Electricity	\$	\$
Insurance	\$	
Internet	\$	
Gas	\$	
Maintenance	\$	
Rent	\$	
Phone	\$	
Water/Sewage	\$	

Recommended 12-15% of net income

TRANSPORTATION		TOTAL
Fuel	\$	\$
Insurance	\$	
Maintenance	\$	
Other	\$	

Recommended 2-3% of net income

MISC.		TOTAL
	\$	\$
	\$	

Recommended 15-25% of net income

HOUSEHOLD		TOTAL
Clothing	\$	\$
Gifts	\$	
Groceries	\$	
Household Items	\$	
Other	\$	
Other	\$	
Other	\$	
CHILDREN		TOTAL
Activities	\$	\$
Child Care	\$	
Clothing	\$	
Education	\$	
Other	\$	

Recommended 5-10% of net income

ENTERTAINMENT		TOTAL
Activities	\$	\$
Food Out	\$	
Movies	\$	
Travel	\$	
Other	\$	
SUBSCRIPTIONS		TOTAL
Music	\$	\$
Storage	\$	
Streaming	\$	
Other	\$	
Other	\$	
Other	\$	

Recommended 5-15% of net income

HEALTH		TOTAL
Doctors Appointments	\$	\$
Dentist Appointments	\$	
Insurance	\$	
Mental Health	\$	
Prescriptions	\$	
Other	\$	
Other	\$	

Total Monthly Income: _____

Total Monthly Expenses: _____

Monthly Remainder: _____