MONTHLY BUDGET WORKSHEET

Spouse's Name: _____

MONTHLY BILLS / EXPENSES

Mortgage / Monthly Rent	\$			
Second Mortgage(s)	\$			
Home Maintenance and Repairs	\$	Subtotal: \$		
(Estimate @ 3% of Home Value / 12 M	lonths)			
				_
Federal Tax Payments	\$			
State / County Tax Payments	\$	Included in Mortgage	Yes No	
Local Tax Payments	\$	Included in Mortgage	Yes No	
Home Owners Insurance	\$	Included in Mortgage	Yes No	
Mortgage Insurance	\$	Included in Mortgage	Yes No	<u> </u>
		Subtotal: \$	· · · · · · · · · · · · · · · · · · ·	
	•			
Food / Groceries	\$			
Clothing Expenses	\$	Subtotal: \$		
Life Insurance Premium(s)	\$			
Medical Insurance and Expenses	\$			
Dental Expenses	\$			
Eye Care Expenses	\$	Subtotal: \$		
Car Payments	\$			
Car Insurance Premium(s)	\$			
Maintenance / Repairs	\$			
Monthly Fuel Expenses	\$	Subtotal: \$		

		Page 2
Personal Loan Payments	\$	
Education Loan Payments	\$	
Child Support / Alimony	\$	
Child Care / Day Care Expenses	\$ Subtotal: \$	

REVOLVING CREDIT CARD PAYMENTS

Credit Card Payment (1) \$		
Credit Card Payment (3) \$	Credit Card Payment (1)	\$
Credit Card Payment (4) \$	Credit Card Payment (2)	\$
Credit Card Payment (5) \$	Credit Card Payment (3)	\$
Credit Card Payment (6) \$	Credit Card Payment (4)	\$
Credit Card Payment (7) \$ Credit Card Payment (8) \$ Credit Card Payment (9) \$	Credit Card Payment (5)	\$
Credit Card Payment (8) \$ Credit Card Payment (9) \$	Credit Card Payment (6)	\$
Credit Card Payment (9) \$	Credit Card Payment (7)	\$
	Credit Card Payment (8)	\$
Credit Card Payment (10) \$ Subtotal: \$	Credit Card Payment (9)	\$
	Credit Card Payment (10)	\$ Subtotal: \$

UTILITIES	
Phone / Communication Services	\$
Gas / Oil	\$
Light / Electric	\$
Cable	\$
Water and Sewage	\$ Subtotal: \$
MISCELLANEOUS EXPENSES	
Personal Grooming	\$
Family Activities	\$
Lunches/Outside Dining	\$ Subtotal: \$

\$_____

TOTAL EXPENSES AMOUNT

		Page 3
INCOME RESOURCES		
Net Pay	\$	
Spouse's Net Pay	\$	
Military Pension(s)	\$	
Retirement Pension(s)	\$	
Child Support Payment(s)	\$	
Alimony / Spousal Support Payments	\$ Subtotal: \$	
NET INCOME TO		
EXPENSE VARIANCE:	\$ DEFICIENCY / SURPLUS AMOUNT	
	(Net Income Less Total Expenses)	