

MONTHLY BUDGET

month: _____

INCOME _____	INCOME _____
INCOME _____	INCOME _____
TOTAL: _____	

EXPENSE	AMOUNT DUE	AMOUNT PAID	BALANCE
CHARITABLE GIVING			
SAVINGS			
HOUSING			
mortgage/rent			
taxes/ins.			
repair			
UTILITIES			
electric/gas			
water/sewer			
trash			
internet			
cable/satellite			
phone			
TRANSPORTATION			
vehicle #1			
vehicle #2			
gas			
public transit fee			
maintenance			
insurance/registration			



FOOD			
groceries			
restaurant			
pet food			
CHILDCARE			
HEALTH			
insurance			
medicine			
toiletries			
doctor visits			
pet care			
life insurance			
DEBT			
loan #1			
loan #2			
credit card #1			
credit card #2			
credit card #3			
credit card #4			
student loan #1			
student loan #2			
MISC.			
clothing			
travel			
entertainment			
gifts			
subscriptions			

notes:
