Personal Monthly Budget

MONTHLY INCOME - 1		**Family Name**	
		Total Net Income	
		Less total Debs	
MONTHLY INCOME - 2		**Difference**	
		Circle One + / -	

HOUSING	Balance	Monthly Payment
Mortgage or rent		
Phone		
Electricity		
Gas		
Water and sewer		
Cable		
Waste removal		
Maintenance or repairs		
Supplies		
Other		
Subtotals		

TRANSPORTATION	Balance	Monthly Payment
Vehicle payment		
Bus/taxi fare		
Insurance		
Licensing		
Fuel		
Maintenance		
Other		
Subtotals		

INSURANCE	Balance	Monthly Payment
Home		
Health		
Life		
Other		
Subtotals		

FOOD	Balance	Monthly Payment
Groceries		
Dining out		
Other		
Subtotals		

Childcare	Balance	Monthly Payment
School Supplies		
Medical		
Personal Care		
Toys		
Other		
Subtotals		

PERSONAL CARE	Balance	Monthly Payment
Medical		
Hair/nails		
Clothing		
Dry cleaning		
Health club		
Organization dues or fees		
Other		
Subtotals		

ENTERTAINMENT	Balance	Monthly Payment
Video/DVD		
CDs		
Movies		
Concerts		
Sporting events		
Live theater		
Other		
Other		
Other		
Subtotals		

LOANS	Balance	Monthly Payment
Personal		
Student		
Credit card		
Credit card		
Credit card		
Other		
Subtotals		

TAXES	Balance	Monthly Payment
Federal		
State		
Local		
Other		
Subtotals		

SAVINGS OR INVESTMENTS	Balance	Monthly Payment
Retirement account		
Investment account		
Other		
Subtotals		

GIFTS AND DONATIONS	Balance	Monthly Payment
Charity 1		
Charity 2		
Charity 3		
Subtotals		

LEGAL	Balance	Monthly Payment
Attorney		
Alimony		
Payments on lien or judgment		
Other		
Subtotals		

Comments:

I verify that this information is true and the best of my knowledge.

Signature — Date — Print Name

Homeowner — *Homeowner*