



BUDGET WORKSHEET

Month & Year _____

HOUSING	Expected	Actual
Mortgage/Rent		
Electricity		
Natural Gas/Propane		
Internet		
Cable/Satellite		
Water		
Trash		
Maintenance		
HOA		
TOTAL	\$	\$
LIVING EXPENSES	Expected	Actual
Groceries		
Household Goods		
Cell Phone		
Clothing		
Pet Care		
Personal Services (hair, dry cleaning)		
Childcare		
TOTAL	\$	\$
AUTO EXPENSES	Expected	Actual
Car Payment		
Gasoline		
Tolls		
Maintenance		
Replacement Savings		
Car Insurance		
TOTAL	\$	\$

MEDICAL/HEALTH	Expected	Actual
Doctors Visits		
Prescriptions		
Eyecare		
Dental		
TOTAL	\$	\$
MISCELLANEOUS	Expected	Actual
Gym/Club Memberships		
Entertainment		
Subscriptions		
Travel (monthly savings)		
Tithe		
Gifts/Offering		
TOTAL	\$	\$
INSURANCE EXPENSES	Expected	Actual
Health		
Homeowner's/Renter's		
Life		
Identity Theft		
Long Term Care		
TOTAL	\$	\$
DEBT	Expected	Actual
Credit Card 1		
Credit Card 2		
Credit Card 3		
Personal Loan		
TOTAL	\$	\$

MONTHLY INCOME MONTHLY EXPENSES MONTHLY SAVINGS