

## MONTHLY BUDGET

**Participant Name:** \_\_\_\_\_

**Date Completed/Updated:** \_\_\_\_\_

We are about to create a budget. Do you want it to reflect just your own finances or the finances of your whole household?

(Note to participants: please make sure all of your answers stay consistent with your response to question above.)

<u>Budget reflects participant only</u>	<u>Budget reflects whole household</u>	
<b>MONTHLY INCOME</b>		
\$ _____ Wages (after tax)	\$ _____ Worker's compensation	
\$ _____ Income from self-employment or business ownership	\$ _____ Veteran's compensation	
\$ _____ Social Security/SSI/SSDI	\$ _____ Rental income	
\$ _____ Food Stamps/WIC	\$ _____ Income from other household members	
\$ _____ Other public B/benefits	\$ _____ Interest/Investment Income	
\$ _____ Alimony/Child Support	\$ _____ Other income	
\$ _____ Unemployment		
<b>TOTAL MONTHLY INCOME \$ _____</b>		
<b>MONTHLY EXPENSES</b>		
<b>Rent, Taxes &amp; Home Maintenance</b>		
\$ _____ Rent	\$ _____ Health Insurance not deducted from paycheck	
\$ _____ Renter's insurance	\$ _____ Dental Insurance not deducted from paycheck	
\$ _____ Mortgage 1 - primary residence	\$ _____ Life insurance ( <i>pro-rate if not paid monthly</i> )	
\$ _____ Mortgage 2, 3, etc. - primary residence	\$ _____ Monthly medical & prescription bills	
\$ _____ Real estate - other than primary residence	\$ _____ Other health related expenses	
\$ _____ Property tax		
\$ _____ Condo/Townhome fees/assessments	<b>Credit Card/Loan payments</b>	
\$ _____ Homeowner's insurance	\$ _____ Revolving credit cards	
\$ _____ Home maintenance ( <i>repairs, equipment, etc.</i> )	\$ _____ Student loans	
\$ _____ Other housing expenses	\$ _____ Informal loans ( <i>family, friends, etc.</i> )	
<b>Utilities</b>		
\$ _____ Gas/heating	\$ _____ Consumer loans	
\$ _____ Electric	\$ _____ Other debt payment expenses	
\$ _____ Water		
\$ _____ Trash	<b>Food</b>	
\$ _____ Sewer	\$ _____ Groceries	
\$ _____ Phone (landline)	\$ _____ Other food expenses ( <i>dining, school lunch, etc.</i> )	
\$ _____ Cell phone ( <i>do not include cable/internet see Personal Expenses</i> )		
\$ _____ Other utility expenses	<b>Personal Expenses</b>	
<b>Transportation</b>		
\$ _____ Vehicle 1 payment	\$ _____ Cable/Internet	
\$ _____ Vehicle 2 payment	\$ _____ Laundry/Dry Cleaning	
\$ _____ Vehicle 3 payment	\$ _____ Tobacco & Alcohol	
\$ _____ Gasoline	\$ _____ Clothing & Accessories	
\$ _____ Car insurance	\$ _____ Hair products/Toiletries	
\$ _____ Car maintenance ( <i>repairs, oil change, etc.</i> )	\$ _____ Beauty salon/Barber shop	
\$ _____ Public transportation	\$ _____ Recreation ( <i>movies, CD's, vacation, etc.</i> )	
\$ _____ Other transportation expenses	\$ _____ Other personal expenses	
<b>Child/Dependent Related</b>		
\$ _____ Childcare/Daycare		
\$ _____ Child support ( <i>non-custodial parent paying the support</i> )	<b>Miscellaneous Expenses</b>	
\$ _____ Education ( <i>for children/dependents</i> ) - tuition, books, etc.	\$ _____ Charitable giving	
\$ _____ Other child/dependent related expenses	\$ _____ Gifts to others	
	\$ _____ Newspapers/Magazines	
	\$ _____ Pet care	
	\$ _____ Allowances for children/dependents	
	\$ _____ Membership dues ( <i>health club, licenses, etc.</i> )	
	\$ _____ Education ( <i>not student loan repayment</i> )	
	\$ _____ Financial ( <i>bank fees, money orders, ATM, etc.</i> )	
	\$ _____ Other miscellaneous expenses	
<b>TOTAL MONTHLY EXPENSES \$ _____</b>		
<b>TOTAL MONTHLY NET INCOME</b>		
Total Monthly Income \$ _____	Total Monthly Expenses \$ _____	Total Monthly Net Income \$ _____
<b>MONTHLY SAVINGS TARGET \$ _____</b>		