

# Creating a Budget

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Prepared by:		Date Originally Prepared
<b>Income</b>	<b>Preparer</b>	<b>Spouse/Other</b>
Net Income		
Unemployment		
Child Support		
Disability/SSI		
Rents Received		
Other: _____		
401k/Investments		
Commission/ Bonus		
Self Employment Income		
<b>Totals, Income</b>		

Item	Paid To	Monthly Amount	Proposed Amount	How	Savings
<b>Housing Costs</b>					
Motgage or Rent					
2nd Mortgage					
Electric					
Phone					
Water/Sewer					
Fuel gas or oil					
Trash removal					
Cable					
Supplies					
Maintenance/ Repairs					
Other: _____					
<b>Automobile(s)</b>					
Payment 1					
Payment 2					
Gas/Oil					
Maintenance					
Licensing					
Other: _____					
<b>Totals, this page</b>					

<b>Item</b>	<b>Paid To</b>	<b>Monthly Amount</b>	<b>Proposed Amount</b>	<b>How</b>	<b>Savings</b>
<b>Insurance</b>					
Homeowners'					
Auto					
Life					
Health					
Disability					
Other:_____					
<b>Food &amp; Groceries</b>					
Groceries					
Meals outside the home					
Other:_____					
<b>Professional Fees</b>					
Physician					
Dentist					
Eye Care					
Veterinarian					
Hair stylist					
Attorney					
Other:_____					
Other:_____					
Other:_____					
<b>Entertainment &amp; Travel</b>					
Movies/rentals					
Dining Out					
Sporting Events					
Concerts					
Travel					
Other:_____					
<b>Totals, this page</b>					

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Item	Paid To	Monthly Amount	Proposed Amount	How	Savings
<b>Clothing</b>					
Purchases					
Cleaning & repair					
Other: _____					
<b>Loans</b>					
Personal					
Credit Card: _____					
Credit Card: _____					
Credit Card: _____					
Credit Card: _____					
Other: _____					
Other: _____					
Other: _____					
<b>Taxes</b>					
Federal					
State					
Local					
Other: _____					
<b>Contributions &amp; gifts</b>					
Charity					
Church					
Birthdays					
Anniversaries					
Weddings					
Other: _____					
Other: _____					
<b>Savings &amp; Investments</b>					
Toward Short Term Goal					
Toward Long Term Goal					
<b>Totals, this page</b>					

# Creating a Budget

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Item	Paid To	Monthly Amount	Proposed Amount	How	Savings
<b>Legal Obligations</b>					
Alimony/child support					
Payments on lien or judgment					
Other: _____					
<b>Child(ren) Expenses</b>					
Child Care					
Allowance					
Sports, Music, Lessons					
Other: _____					
Other: _____					
Other: _____					
<b>Miscellaneous</b>					
Dues					
Health Club					
Postage					
School Tuition					
Other: _____					
Other: _____					
Other: _____					
<b>Personal Items</b>					
Describe:					
Describe:					
Describe:					
<b>Totals, this page</b>					
<b>Totals, Page 1</b>					
<b>Totals, Page 2</b>					
<b>Totals, Page 3</b>					
<b>Totals, Page 4</b>					
<b>Expense Total (Pages 1-4)</b>					

<b>Totals, Income</b>					
<b>Subtract Expense Total</b>					
<b>Grand Total</b>					



