



Name: _____

Month: _____

BUDGET WORKSHEET

Monthly Income	Budget Amount	Actual Amount
Employment Wages (after taxes)		
Other income (food stamps, child support)		
Other		
Total Income		

Monthly Bills	Budget Amount	Actual Amount
Rent		
Utilities		
Telephone/Cell Phone		
Cable/Internet		
Car Payment		
Car Insurance		
Debt (credit cards, student loans, check cashing, furniture/appliances)		
Tuition/School Fees		
Child Care		
Other		
Other		
Total Monthly Bills		

Monthly Savings	Budget Amount	Actual Amount
Savings		
Total Savings		

Other Regular Cash Expenses	Budget Amount	Actual Amount
Groceries		
Household Products/Toiletries		
Laundry/Dry Cleaning		
Lunches, Fast Food		
Gas, Parking		
Car Maintenance, Renewal Fees		
Personal Care/Salon Services		
Clothing		
Entertainment		
Gambling (lottery tickets, bingo)		
Hobbies (extracurricular fees)		
Magazines, Newspapers		
Other		
Other		
Total Cash Expenses		

Total Monthly Expenses		
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