# Budget Worksheet

## Monthly Bills

| Monthly Expense: | Amount: |
|---|---|
| Giving: | |
| Rent/Mortgage: | |
| Food: | |
| Electric: | |
| Water: | |
| Garbage: | |
| Phone/Cell: | |
| Internet: | |
| Gas: | |
| Car Insurance: | |
| Health Insurance: | |
| Life Insurance: | |
| Disability Insurance: | |
| | |
| Total Bills: | |
| **Extras:** | |
| Allotments: | |
| | |
| | |
| Total Extras: | |
| Monthly Total: | |

## Monthly Income

| Source: | Amount: |
|---|---|
| | |
| | |
| | |
| | |
| Total Income: | |

**Monthly Income:** _____

**-**

**Monthly Bills:** _____

**Total Left to apply to debts**

**=** _____

## Debts

| Debts: | Amount Applied: | Still Owe: |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Total Debt: | |