



FAMILY BUDGET WORKSHEET

Monthly Expense

Deductions

Savings (to set aside) _____
 Child Support, Alimony etc. _____
 Other: _____

Housing

Rent or Mortgage payment _____
 Utilities _____
 Home Insurance & Taxes _____
 Other: _____

Debt Payment

Credit Card Payments (min) _____
 Other Loans: _____

Food

Groceries _____
 Eating Out _____
 Coffee & Bar _____
 Other: _____

Transportation

Car Payment _____
 Car Insurance + Taxes _____
 Car Maintenance _____
 Gas _____
 Public Transit, Parking, Tolls _____
 Other: _____

Family

Day Care & Babysitting _____
 Activities & Lessons _____
 Allowances & Child Support _____
 Other: _____

Budget Actual

Monthly Expense

Personal & Health

Clothing _____
 Toiletries & Care Products _____
 Haircuts _____

Gym & Sport Club Dues _____
 Health, Life, etc. Insurance _____
 Doctor & Dentist Visits _____
 Prescription & OTC Drugs _____
 Other: _____

Education

Tuition _____
 Books & Fees _____
 Supplies _____
 Other: _____

Entertainment

Tickets for Shows & Games _____
 Books & Magazine subscr. _____
 DVDs, CDs, Video Games _____
 Other: _____

Miscellaneous

Charity, Gifts & Offerings _____
 Pet Supplies & Vet _____
 Entertaining Guests _____
 Cash not Accounted for _____
 Other: _____

Budget

Summary Calculation

Monthly **Net** Income _____
 - Expenses Total _____
 = **Monthly Spendable Income**

