

MONTHLY EXPENSE WORKSHEET					
CATEGORY	MONTHLY	REVISED	CATEGORY	MONTHLY	REVISED
SAVINGS			CLOTHING		
HOUSING			Clothing/Shoes/Boots		
Rent/Mortgage/Lot Rent			Laundry		
2nd Mortgage			Dry Cleaning		
Property Taxes/escrow?			EDUCATION		
Heating			School Supplies		
Electricity			Tuition/Lessons		
Phone/Cell/Pager			Books/Papers/Magazines		
Water/Sewer/Trash			School pictures/yearbook		
Home Maintenance			DONATIONS		
Furnishing/Appliances			Church Tithes/Dues		
Lawn Care/Snow			All Other		
Cleaning Supplies			PERSONAL		
GROCERIES			Professional Hair Care		
Food			Personal Care Items		
Paper Products			Petty Cash: Adult		
Lunch/Snack(work/school)			Allowances: Children		
Pet Food			Cigarettes/Tobacco		
Bulk Food Reserve			Alcoholic Beverages		
TRANSPORTATION			ENTERTAINMENT		
Gas/Oil/Bus Fare			Vacations/Weekend Trips		
Repairs/Maintenance			Videos/eat out/movies		
Car Wash/Parking			Cable TV		
Licenses/Registration			Babysitter		
Car Lease/Payment			Health/Social Clubs		
INSURANCE			Gambling - Lottery/Casino		
Health			Internet Access		
Vehicle			MISCELLANEOUS		
Homeowner/Renter's			Check/Money Orders		
Life/Disability			Union/Professional Dues		
CHILD CARE			Veterinary Care		
Child Support			Hobbies		
Child care/Daycare			Postage		
Diapers/Wipes			Tax Preparation		
MEDICAL			GIFTS		
Doctor			Major Holidays		
Dentist/Braces			Other Gifts		
Prescriptions			Subtotal Column 2		
Glasses/Eye Exams				\$0	\$0
Chiropractic			COUNSELOR USE:		
Counseling			Current		
Subtotal Column 1					Revised
			\$0	\$0	
Name:			Net Monthly Income:		
Date:			Monthly Expenses:		
				\$0	\$0
			Subtotal: inc. - exp.		
				\$0	\$0
			Monthly Debt Payment:		
			SURPLUS/DEFECIT:		
				\$0	\$0