

**Monthly Bill Organizer - provided by SampleWorksheets.com**

Monthly Income	Medical Ded.	Total Income (Less: Medical)	Mortgage Income Monthly	Car Cost	Life Mortg.	Child Support
Wage Income						
Capital Income						
Total Income		\$ 0.00	\$ 0.00			
<b>Secured Debt</b>						
		Paid	Not Paid			
Mortgage 1						
Mortgage 2						
Mortgage 3						
Auto Loan 1						
Auto Loan 2						
Auto Loan 3						
Student Loan 1						
Auto Loan 4						
Total Secured Debt		\$ 0.00	\$ 0.00			
<b>Unsecured Debt</b>						
		Paid	Not Paid			
Credit Card 1						
Credit Card 2						
Credit Card 3						
Credit Card 4						
Credit Card 5						
Credit Card 6						
Credit Card 7						
Credit Card 8						
Personal Loan 1						
Personal Loan 2						
Personal Loan 3						
Total Unsecured Debt		\$ 0.00	\$ 0.00			
<b>Utilities</b>						
		Paid	Not Paid			
Gas						
Electric						
Garbage						
Water						
Sanitation						
Telephone						
Cell Phone						
Internet Service						
Cable TV						
Satellite						
Total Utilities		\$ 0.00	\$ 0.00			
<b>Insurance</b>						
		Paid	Not Paid			
Auto						
Life						
Medical						
Disability						
Auto						
Total Insurance		\$ 0.00	\$ 0.00			
<b>Total Amounts</b>						
Total Amount of Bills Paid		\$ 0.00	\$ 0.00			
Cash after Bills Paid		\$ 0.00	\$ 0.00			