

MONTHLY Budget WORKSHEET

Month of...

Take-Home Pay:

DONATIONS

	Spent	Budgeted
Tithe	_____	_____
Missions/Charity	_____	_____
TOTAL	_____	_____

SAVINGS

	Spent	Budgeted
Emergency Fund	_____	_____
Vacation	_____	_____
Other _____	_____	_____
TOTAL	_____	_____

HOUSING

	Spent	Budgeted
Rent/Morgage	_____	_____
Electricity	_____	_____
Gas	_____	_____
Water	_____	_____
Trash	_____	_____
Phone	_____	_____
Internet	_____	_____
Other _____	_____	_____
TOTAL	_____	_____

TRANSPORTATION

	Spent	Budgeted
Car Insurance	_____	_____
Gasoline	_____	_____
Repairs & Upkeep	_____	_____
License & Tax	_____	_____
Other _____	_____	_____
TOTAL	_____	_____

HEALTH

	Spent	Budgeted
Health Insurance	_____	_____
Medication	_____	_____
Doctor Bills	_____	_____
Gym	_____	_____
Other _____	_____	_____
TOTAL	_____	_____

FOOD

	Spent	Budgeted
Groceries	_____	_____
Restaurants	_____	_____
TOTAL	_____	_____

MISCELLANEOUS

	Spent	Budgeted
Recreation	_____	_____
Household Supplies	_____	_____
Education	_____	_____
Gifts	_____	_____
Fun Money (Him)	_____	_____
Fun Money (Her)	_____	_____
Allowances (Kids)	_____	_____
Clothing / Haircuts	_____	_____
Other _____	_____	_____
TOTAL	_____	_____

Don't forget--
Your goal is to get this
number to zero!



Take Home Pay
- Spent Category Totals

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TOTAL