

Use this worksheet to see how much money you spend this month. Then, use this information to plan next month's budget.

Some bills are monthly, and some come less often. If you have an expense that does not occur every month, enter it into the "Other" category.

MONTH: YEAR:	
Income this month:	
Paychecks (after taxes, benefits, etc.)	
Other income	
	Total monthly income
Expenses this month:	
HOUSING	
Rent or Mortgage	
Rent Insurance or Mortgage Insurance	
Home Equity Loan Payment	
Property Taxes	
Electricity	
Gas	
Internet	
Cable	
TRANSPORTATION	
Car Loan	
Car Insurance	
Gas for Car	
Car Maintenance (Oil Changes, Tires, etc.)	
Public Transportation, Uber, Lyft, Taxis	

Income	- Expenses	= Remaining
	i otal month	lly expenses
	Total mouth	dy ovnonces
Other:		
Other:		
Loan Payment		
Credit Card Payment		
Credit Card Payment		
Savings		
OTHER		
Entertainment (movies, parks, concer	ts, etc.)	
Hair & Beauty		
Clothes & Shoes		
Laundry		
Child Support		
Child Care		
PERSONAL & FAMILY		
Household Supplies (paper towels, so	oap, cleaners, garbage bags, et	c.)
Dining Out		
Take Out		
Groceries		
FOOD & HOUSEHOLD SUPPLIES		
Other Health Expenses (doctors' appo	ointments, dentist, eyeglasses)	
Medications		
Health Insurance		
HEALTH		

If your income is more than your expenses, you have money left to spend or save more. If your expenses are more than your income, look for at ways to cut expenses.