

MONTHLY BUDGET FORM				
MONTHLY TAKE HOME INCOME AMOUNT:				
EXPENSE	BUDGETED AMOUNT	ACTUAL AMOUNT	DIFFERENCE	
			"Projected Cost"	"Paid Amount"
Savings / Giving				
Tithe				
Offerings				
Emergency Fund				
College Fund				
Retirement Fund				
Investments				
Other				
Total:				
Housing				
Mortgage/Rent				
Second Mortgage				
Association Dues				
Taxes				
Home or Rental Insurance				
Maintenance				
Other				
Total:				
Utilities				
Electric				
Water				
Gas / Propane				
Trash				
Cable				
Internet				
Home Phone / Fax				
Cell Phone				
Other				
Total:				
Food				
Groceries				
Restuarants				
Fast Food				
Other				
Total:				
Transportation				
Car Payment 1				
Car Payment 2				
Gas				
Oil Changes				
Maintenance				
Tires				
Car Insurance				
Registration / Taxes				
Toll Charges				
Other				
Total:				
Clothing				
Adults				
Children				
Dry Cleaning				
Laundry				
Total:				
Medical / Health				
Health Insurance				
Medical Bills				
Dental Care				
Optometrist				
Medications				
Vitamins				
Other				
Total:				
Personal / Extras				
Life Insurance				
Disability Insurance				
Long-Term Care Insurance				
Identity Theft				
Toiletries				
Hair / Cosmetics				
Fun Money				
Misc. Spending				
Holidays / Gifts				
Vacation				
School Tuition				
School Supplies				
Children's School Extra				
Childcare				
Baby Supplies				
Music Technology				
Organization Dues				
Other				
Total:				
Debt				
Student Loan 1				
Student Loan 2				
Credit Card 1				
Credit Card 2				
Credit Card 3				
Other				
Total:				
Overall Total:				