

MONTHLY BUDGET

<i>Name(s):</i> _____ _____	<i>Monthly payment</i>
<i>Date:</i> _____	
Rent/Mortgage	
Property Taxes	
Homeowner's/Renter's Insurance	
Private Mortgage Insurance (PMI)	
Condo Fee	
Homeowner's Association Fee	
Water/Sewage bill	
Gas/Oil for house	
Electric bill	
Home Phone	
Internet	
Cell Phone	
Installment loan with _____	
Installment loan with _____	
Charge Account _____	
Charge Account _____	
Life Insurance	
Car Insurance	
Food-Grocery Store	
Auto expenses (repairs, tags, etc)	
Gasoline for automobile/Transportation (bus, metro, parking)	
Medical (doctor, dentist, eye care, prescriptions)	
Daycare	
Lunches/snacks, coffee, Fast Food, etc.	
Cable TV, Pay per view, video rental	
Dry cleaning, laundry	
Education expenses (including books)	
Church/religious donations/Other donations	
Pet expenses	
Barber/hair salon	
Cigarettes/beverages (including alcoholic)	
Newspaper/magazines, etc.	
Entertainment (including babysitting expense)	
Clubs, sports hobbies	
New clothing/shoes	
College Funds	
Gifts-Birthdays, anniversaries, holidays	
Travel	
Savings for _____	
Savings for _____	

_____ = \$ _____

Total Net Monthly Income (minus)
Total Monthly Expenses