

Monthly Household Budget

Name _____

Date _____

Monthly Income

Gross Wages \$ _____
 Gross Wages (Co-applicant) \$ _____

Take-Home Wages	\$ _____
Take-Home Wages (Co-applicant)	\$ _____
Social Security	\$ _____
Social Security	\$ _____
Pension	\$ _____
Child Support	\$ _____
Food Stamps	\$ _____
Other Income	\$ _____
Total Take-Home Income	\$ _____

Monthly Living Expenses	
Rent	\$ _____
Groceries	\$ _____
Electricity	\$ _____
Natural Gas	\$ _____
Telephones	\$ _____
Water/trash	\$ _____
Cable/satellite	\$ _____
Internet	\$ _____
Car gas/maintenance	\$ _____
Car insurance	\$ _____
Health insurance	\$ _____
Life/disability insurance	\$ _____
Renters insurance	\$ _____
Medical care (Dr., Rx, etc.)	\$ _____
Child care	\$ _____
Education (tuition, supplies)	\$ _____
Clothing	\$ _____
Household Items	\$ _____
Child support	\$ _____
Children's activities	\$ _____
Alarm service	\$ _____
Personal care (hair, nails)	\$ _____
Entertainment (including food)	\$ _____
Subscriptions	\$ _____
Tithes/donations	\$ _____
Gifts	\$ _____
Other expenses	\$ _____
Savings	\$ _____
Total Living Expenses	\$ _____

Monthly Debt Payments	
Car loan	\$ _____
Student Loans	\$ _____
Finance Company	\$ _____
Finance Company	\$ _____
Credit Card	\$ _____
Credit Card	\$ _____
Credit Card	\$ _____
Medical Bills	\$ _____
Other Payments	\$ _____
Total Monthly Debt	\$ _____
Payments	\$ _____

Summary of Budget	
Total Take-Home	
Income	\$ _____
	(minus)
Total Living Expenses	\$ _____
Total Debt Payments	\$ _____
Monthly Balance	\$ _____