

# ESTIMATED BUDGET

## MONTHLY INCOME

**Gross Monthly Income \$**

Salary \$ \_\_\_\_\_

Interest \$ \_\_\_\_\_

Dividends \$ \_\_\_\_\_

Other Income \$ \_\_\_\_\_

### Less

1. Tithe/Giving \$ \_\_\_\_\_

2. Taxes \$ \_\_\_\_\_  
(Federal/State/Fica)

**Net Spendable Income \$**

## MONTHLY LIVING EXPENSES

**Housing \$**

Mortgage/Rent \$ \_\_\_\_\_

Insurance \$ \_\_\_\_\_

Property taxes \$ \_\_\_\_\_

Cable TV \$ \_\_\_\_\_

Electricity \$ \_\_\_\_\_

Gas \$ \_\_\_\_\_

Water \$ \_\_\_\_\_

Sanitation \$ \_\_\_\_\_

Telephone \$ \_\_\_\_\_

Maintenance \$ \_\_\_\_\_

Internet service \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**Food \$**

**Auto \$**

Payments \$ \_\_\_\_\_

Gas & Oil \$ \_\_\_\_\_

Insurance \$ \_\_\_\_\_

License/Taxes \$ \_\_\_\_\_

Maintenance \$ \_\_\_\_\_

Replacement \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**Debts \$**

(Not including house or auto)

**Savings \$**

**Insurance \$**

Insurance \$ \_\_\_\_\_

Life \$ \_\_\_\_\_

Health/Dental \$ \_\_\_\_\_

Disability \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**Entertainment/Recr. \$**

Eating out \$ \_\_\_\_\_

Babysitters \$ \_\_\_\_\_

Activities/Trips \$ \_\_\_\_\_

Vacation \$ \_\_\_\_\_

Pets \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**Clothing \$**

**Medical/Dental \$**

Doctor \$ \_\_\_\_\_

Dentist \$ \_\_\_\_\_

Prescriptions \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**Miscellaneous \$**

Toiletries/Cosmetics \$ \_\_\_\_\_

Beauty/Barber \$ \_\_\_\_\_

Laundry/Cleaners \$ \_\_\_\_\_

Allowances \$ \_\_\_\_\_

Subscriptions \$ \_\_\_\_\_

Gifts \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**Investments \$**

**School/Childcare \$**

Tuition \$ \_\_\_\_\_

Materials \$ \_\_\_\_\_

Transportation \$ \_\_\_\_\_

Childcare \$ \_\_\_\_\_

**TOTAL LIVING EXPENSES**

## HOW THE MONTH TURNS OUT

**Net Spendable Income \$**

**- Total Living Expenses \$**

**\$**

