

Simple Monthly Budget

Month _____ Year _____

MONTHLY INCOME

Note: Remember, this is after taxes and deductions!

Paychecks/Salary #1	
Paychecks/Salary #2	
Contract Work	
Benefits	
Other (Example, Child Support or Gifts)	
TOTAL MONTHLY INCOME	

MONTHLY EXPENSES

HOUSING & UTILITIES

Rent or Mortgage	
Renter's or Homeowner's Insurance	
Electric	
Gas	
Water	
Trash/Garbage	
Phone	
Internet	
Homeowners Association	
Property Taxes	
Other	
HOUSING MONTHLY EXPENSES	

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TRANSPORTATION

Car Payment #1	
Car Payment #2	
Regular Maintenance	
Gas and Fuel	
Car Insurance	
Tolls and Parking	
Other	
TRANSPORTATION MONTHLY EXPENSES	

FOOD

Groceries	
Household Supplies	
Meals Out/Fast Food	
Food Apps	
Other	
FOOD MONTHLY EXPENSES	

DONATIONS, CLUBS, & MEMBERSHIPS

Donations	
Clubs & Memberships	
Other	
DONATIONS/CLUBS MONTHLY EXPENSES	

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HEALTH	
Medicine	
Health Insurance	
Specialists	
Life Insurance	
Vision	
Dental	
Urgent Care/E.R.	
Other	
HEALTH MONTHLY EXPENSES	

CHILDREN	
Childcare	
Child Support	
Tuition	
Education	
Extracurricular Activities	
Other	
CHILDREN MONTHLY EXPENSES	

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ENTERTAINMENT

Movies	
Streaming Apps	
Sporting Events	
Concerts	
Amusement Parks	
Video Games	
Electronics	
Other	
ENTERTAINMENT MONTHLY EXPENSES	

PERSONAL

Money Given or Sent to Family	
Clothing/Shoes	
Laundry/Dry Cleaning	
Grooming/Beauty Care	
Other	
PERSONAL MONTHLY EXPENSES	

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OTHER	
Bank or Credit Card Fees	
Prepaid Cards and Phone Cards	
Other Expenses	
OTHER MONTHLY EXPENSES	

CREDIT CARDS & PERSONAL LOANS		
Credit Card or Loan	Total Balance	Monthly Payment
CREDIT CARD & LOANS TOTAL BALANCE & MONTHLY EXPENSES		

TOTAL MONTHLY EXPENSES	
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TOTAL MONTHLY SURPLUS/DEFICIT Total Income - Total Expenses	
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EMERGENCY FUND

Should always represent 3 - 6 months of expenses

Total Monthly Expenses

Number of Months

Fund Goal

X

=

SAVINGS

Total Monthly Surplus from Page 5

Account

Percentage

Amount

Roth IRA

Traditional IRA

Education/529

Savings/Money Market

Stocks/Mutual Funds

Checking/Cash

Other

Total Saved