

Creating a Budget

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Prepared by:			Date Originally Prepared		
Item	Paid To	Monthly Amount	Proposed Amount	How	Savings
Housing Costs					
Mortgage or Rent					
2 nd Mortgage					
Electric					
Phone					
Water/Sewer					
Fuel gas or oil					
Trash removal					
Cable					
Supplies					
Maintenance/Repairs					
Other: _____					
Automobile(s)					
Payment 1					
Payment 2					
Gas/Oil					
Maintenance					
Licensing					
Other: _____					
Insurance					
Homeowners'					
Auto					
Life					
Health					
Disability					
Other: _____					
Totals, this page					



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Item	Paid To	Monthly Amount	Proposed Amount	How	Savings
Food & Groceries					
Groceries					
Meals outside the home					
Other: _____					
Professional Fees					
Physician					
Dentist					
Eye Care					
Veterinarian					
Hair stylist					
Attorney					
Other: _____					
Other: _____					
Other: _____					
Entertainment & Travel					
Movies/rentals					
Dining Out					
Sporting Events					
Concerts					
Travel					
Other: _____					
Totals, this page					



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Item	Paid To	Monthly Amount	Proposed Amount	How	Savings
Clothing					
Purchases					
Cleaning & repair					
Other: _____					
Loans					
Personal					
Credit Card: _____					
Credit Card: _____					
Credit Card: _____					
Credit Card: _____					
Other: _____					
Other: _____					
Other: _____					
Taxes					
Federal					
State					
Local					
Other: _____					
Contributions & gifts					
Charity					
Church					
Birthdays					
Anniversaries					
Weddings					
Other: _____					
Other: _____					
Savings & Investments					
Toward Short Term Goal					
Toward Long Term Goal					
Totals, this page					



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Item	Paid To	Monthly Amount	Proposed Amount	How	Savings
Legal Obligations					
Alimony/child support					
Payments on lien or judgement					
Other: _____					
Child(ren) Expenses					
Child Care					
Allowance					
Sports, Music Lessons					
Other: _____					
Other: _____					
Other: _____					
Miscellaneous					
Dues					
Health Club					
Postage					
School Tuition					
Other: _____					
Other: _____					
Other: _____					
Your Own Personal Items					
Describe:					
Describe:					
Describe:					
Describe:					
Totals, this page					
Totals, Page 1					
Totals, Page 2					
Totals, Page 3					
Totals, Page 4					
Grand Total					

