

# Budget Worksheet

Use this budget worksheet to track your expenses for the next month. If your bills vary, it may take several months to develop an accurate account. After your totals have been calculated, print this form and keep it in a convenient location. Compare your expenses to the budget every month to ensure you're not overspending. Adjust accordingly for salary or bill increases.

## Income

1. \_\_\_\_\_ Monthly Salary (minus taxes)
2. \_\_\_\_\_ Investment Income
3. \_\_\_\_\_ Other (child support, alimony, etc.)
4. \_\_\_\_\_ **Total Income** (Sum of lines 1 through 3)

## Expenses

### Housing

5. \_\_\_\_\_ Housing (rent, mortgage, association dues)
6. \_\_\_\_\_ Home Care (repairs, lawn service, etc.)
7. \_\_\_\_\_ **Total Housing** (Sum of lines 5 through 6)

### Utilities

8. \_\_\_\_\_ Electric
9. \_\_\_\_\_ Gas
10. \_\_\_\_\_ Water
11. \_\_\_\_\_ Trash Service
12. \_\_\_\_\_ Telephone
13. \_\_\_\_\_ Cellular Service
14. \_\_\_\_\_ Cable/Television
15. \_\_\_\_\_ Internet Access
16. \_\_\_\_\_ Other
17. \_\_\_\_\_ **Total Utilities** (Sum of lines 8 through 16)

### Food

18. \_\_\_\_\_ Groceries
19. \_\_\_\_\_ Dining Out
20. \_\_\_\_\_ Other
21. \_\_\_\_\_ **Total Food** (Sum of lines 18 through 20)

### Auto

22. \_\_\_\_\_ Loans
23. \_\_\_\_\_ Maintenance
24. \_\_\_\_\_ Gas
25. \_\_\_\_\_ Other
26. \_\_\_\_\_ **Total Auto** (Sum of lines 22 through 25)

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**Insurance**

27. \_\_\_\_\_ Health  
28. \_\_\_\_\_ Auto  
29. \_\_\_\_\_ Home  
30. \_\_\_\_\_ Life  
31. \_\_\_\_\_ Other  
32. \_\_\_\_\_ **Total Insurance** (Sum of lines 27 through 31)

**Loans**

33. \_\_\_\_\_ Education (student loans, tuition)  
34. \_\_\_\_\_ Credit Card Payments  
35. \_\_\_\_\_ Other Loans  
36. \_\_\_\_\_ **Total Loans** (Sum of lines 33 through 35)

**Personal care**

37. \_\_\_\_\_ Toiletries  
38. \_\_\_\_\_ Prescription Medication  
39. \_\_\_\_\_ Entertainment  
40. \_\_\_\_\_ Gym Memberships  
41. \_\_\_\_\_ Vacation/Travel  
42. \_\_\_\_\_ Other (clothing, gifts, etc.)  
43. \_\_\_\_\_ **Total Personal Care** (Sum of lines 37 through 42)

**Savings**

44. \_\_\_\_\_ Emergency Fund Savings  
45. \_\_\_\_\_ Other Savings  
46. \_\_\_\_\_ **Total Savings** (Sum of lines 44 through 45)  
  
47. \_\_\_\_\_ Miscellaneous Expenses

**Totals**

48. \_\_\_\_\_ **Total Income** (Line 4)  
49. \_\_\_\_\_ **Total Expenses** (Sum of lines 7, 17, 21, 26, 32, 36, 43, 46 and 47)  
50. \_\_\_\_\_ **Balance** (Line 48 minus line 49)