

Name: \_\_\_\_\_

## PERSONAL BUDGET PLANNER

Month and Year: \_\_\_\_\_

Table 1	CURRENT SPENDING	NECESSARY CHANGES	PLANNED BUDGET
<b>ESSENTIAL MONTHLY EXPENSES</b>	\$	\$	
<b>Home</b>			
Rent or Mortgage			
Electricity			
Water/ Sewer/ Garbage			
Telephone - Local			
Telephone - Long Distance			
<b>Food</b>			
Groceries			
School Lunches			
Work Lunches			
<b>Transportation</b>			
Car Payment			
Car Insurance			
Gasoline			
Repairs and Maintenance			
Public Transportation (e.g., bus, train)			
<b>Other Basic Expenses</b>			
Child Care			
Child Support			
Clothing			
Haircuts/Personal Care			
Insurance: Life, Health, Disability, etc.			
Laundry, Dry Cleaning			
Medical and Dental			
Prescriptions			
Newspaper			
Cable TV			
School Expenses			
Taxes: IRS, Property			
<b>Savings</b>			
Emergencies			
Long-Term Goals			
Retirement			
Short-Term Goals			
<b>Total Essential Monthly Expenses</b>			

Table 2	CURRENT SPENDING	NECESSARY CHANGES	PLANNED BUDGET
<b>OTHER MONTHLY EXPENSES</b>	\$	\$	\$
<b>Credit Card Payments</b>			
<b>Installment Loan Payments</b>			
<b>Entertainment</b>			
Eating Out or Ordering In			
Movie Tickets			
Plays/Concerts			
VCR/DVD Movie Rentals			
CDs, Tapes, Music Supplies			
Sporting Events			
Internet Access Fees			
Books, Magazines, Newspapers			
<b>Clubs/Organizations</b>			
Gym or Health Club Dues			
Club Dues/Expenses (scouts, soccer, etc.)			
Professional Organization Dues			
Social Organization Dues			
<b>Gifts and Donations</b>			
Gifts and Cards (avg. for holidays, birthdays)			
Religious Tithes			
Charitable Contributions			
<b>Pets</b>			
Veterinary Expenses (average)			
Pet Food			
<b>Miscellaneous Expenses</b>			
Children's Allowances			
Vacations			
Occupational License Fees			
Cigarettes, Tobacco Products			
Alcoholic Beverages			
Snacks (work, convenience stores, vending)			
<b>Total Other Expenses</b>			
<b>Total Essential Monthly Expenses</b>			
<b>Total Living Expenses</b>			

	GROSS INCOME	NET INCOME	(Total Net Monthly Income) - (Total Monthly Living Expenses) = (+ or -)
<b>MONTHLY INCOME</b>	\$	\$	\$ _____ - \$ _____ = \$ _____
Income 1			
Income 2			
Other Income (Child support, social security, military retirement, etc.)			
<b>TOTAL GROSS/NET INCOME</b>			

Step 1

Step 11 Step 12

Step 3

Step 2

Steps 4 & 5

Steps 6 & 7

Step 8

Steps 9 & 10

Name: \_\_\_\_\_

Month and Year: \_\_\_\_\_

**PERSONAL  
BUDGET PLANNER**



Name: \_\_\_\_\_

Month and Year: \_\_\_\_\_

**PERSONAL  
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Name: \_\_\_\_\_

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