|  |  |  |  |
| --- | --- | --- | --- |
| \*If your Expense or Income is something other than monthly, try to determine what it would be monthly to help you organize your budget. | | | |
| **Expenses (Monthly)** | **Pay Out Amount** | **Due Date** | **Received Amount** |
| Mortgage/Rent | $ |  |  |
| Taxes & Insurance & Association Fees | $ |  |  |
| Home Repairs | $ |  |  |
| Utilities (Electric/Gas/Oil) | $ |  |  |
| Water & Sewer | $ |  |  |
| Phone (Cellular) | $ |  |  |
| Internet/Cable/Satellite | $ |  |  |
| Car Payment | $ |  |  |
| Gas | $ |  |  |
| Car Insurance | $ |  |  |
| Car Repairs/Maintenance | $ |  |  |
| Other Transportation (bus) | $ |  |  |
| Life/Disability/Health Insurance | $ |  |  |
| Credit Card 1 | $ |  |  |
| Student Loans | $ |  |  |
| Groceries/Eating Out | $ |  |  |
| Day Care | $ |  |  |
| Child Support | $ |  |  |
| School Tuition/Fees | $ |  |  |
| Medication | $ |  |  |
| Toiletries/Makeup/Clothing | $ |  |  |
| Pet Food | $ |  |  |
| Pet Care (vet, grooming, etc) | $ |  |  |
| Hobbies(Books, games, music)/Holidays | $ |  |  |
| Cleaning Supplies | $ |  |  |
| Other | $ |  |  |
| **Total Expenses:** | $ |  |  |
| **Income (Monthly)** |  |  |  |
| Wages (including work study) |  |  | $ |
| Child Support |  |  | $ |
| SNAP (Food stamps) |  |  | $ |
| Grants/Scholarships |  |  | $ |
| Disability/Unemployment/Workman’s Compensation |  |  | $ |
| Parental Assistance or other Financial Help |  |  | $ |
| **Total Income:** |  |  | $ |
|  | | | |
| Are your total expenses more than your total income? If yes, you may want to look at what expenses are necessary and what you are able to cut back on to live within your budget. | | | |