

# Monthly Budget

Month: \_\_\_\_\_

Income #1	
Income #2	
<b>Income Total</b>	

Home Expenses	Plan	Actual	+/-
Mortgage/Rent			
Electric			
Gas			
Water/Sewer/Trash			
Internet/Cable			
Home Supplies			
Home Repairs			
Transportation	Plan	Actual	+/-
Gas			
Tolls & Fares			
Auto Repairs			
Debt	Plan	Actual	+/-
Auto Loan			
Credit Card 1			
Credit Card 2			
<b>Total</b>			

Living Expenses	Plan	Actual	+/-
Food (Groceries - Take Out - Dine Out)			
Clothing			
Cell Phone			
Hair & Personal Care			
Child Care			
Gifts			
Allowance			
Insurance	Plan	Actual	+/-
Auto Insurance			
Life Insurance			
Health Insurance			
Savings	Plan	Actual	+/-
Emergency Fund			
Retirement Fund			
Vacation Fund			
<b>Total</b>			

<b>Total Income</b>	
<b>Total Expenses</b>	
<b>Difference</b>	

<b>Exceptions This Month:</b>
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