

MONTHLY BUDGET

Month of: _____ Year: _____

After-Tax Income

Needs Total

Wants Total

Savings & Debt Repayment Total

Needs	Budget	Spent
Mortgage/Rent		
Groceries		
Other Essentials		
Health Insurance		
Other Healthcare		
Auto Insurance		
Auto Loan		
Gas		
Utilities		
Water		
Sanitation/Garbage		
Internet		
Phone		
Minimum Loan/CC Payments		
Minimum Student Loan Payments		
Renters/Homeowner Insurance		
Property Tax		
Life Insurance		
Parking		
Other Auto		
Public Transit		
Child Care		
Child Support		
Misc. Home-Related		

Total:

Notes

Wants	Budget	Spent
Subscriptions		
Hobbies		
Restaurants		
Vacation & Travel		
Clothes		
Gym Membership		
Alcohol		
Events		
Home Decor		

Total:

Savings & Debt Repayment	Budget	Spent
Extra Debt Payments (Mortgage, Auto, Student Loan, CC)		
High-Interest Savings		
Investments		
Emergency Fund		
401K		
IRA		

Total:

Total Budget: () - **Total Spent:** () =

