BUDGET WORKSHEET

Name:			ADDITIONAL CASH		HOME	HOME	
			Part-time Job		Home Option:	Home Option:	
Occupation: Animal Control Officer			Personal Loan (Full Amount)		Payment (Principal/Interest)		
					Taxes, Insurance & PMI*		
Spouse's Occupation: Heavy Equipment			Tota	al	Rent		
Number of Children: 1- Jonathon			DEBTS AND	LOANS	Renter's Insurance		
(5 months old)			Student Loans		Electricity & Heat		
INCOME			Credit Cards	\$540	Water & Trash		
Monthly Net		\$3,158	Personal Loan (Monthly Amount	:)	Furniture		
Spouse's Monthly Net		\$3,874			Home Decor		
			Tot	al			
Total \$7,032		SAVINGS		(*private mortgage insurance) Total			
Credit Score 700	+ or -	New Score	Savings (Emergency Fund)		DAILY LIVING		
List table here			Retirement/Investments		(If child is under 1-year, do not include in family s	size.)	
List table here			(Compound Interest)		Dining Out (Select 1)		
List table here			Tot	al	Incidentals (1 or More)		
List table here			FAMILY L	IFE			
WHEEL OF REALITY			(If child is under 1-year, must do 1-3)				
Unexpected Expense -			Groceries (Select 1)		Clothing (Select 1)		
Unexpected Income +			1. Formula or Nursing		Outwear (Select 1)		
			2. Diapers		Accessories (1 or More)		
Total		3. Baby Wipes		7 L			
			Childcare		T		
Notes:			Additional Accessories		7 L		
1) Visit every table.			Pets (Optional)		Personal Care (1 or More)		
2) Total expenses for each section.			Church (Optional)		7		
3) Carry each total to back page final balance.			Charity (Optional)		7 L		
4) Meet with financia	al advisor to	review			7		
your budget.		Tota	ս	Total			



BUDGET WORKSHEET

AUTOMOTIVE	COMMUNICATIONS	FINAL BALANCE	
Vehicle(s):	Communications Option:	List totals from each category below	
Monthly Payment (Car 1)	Cell Service	Income +	
Monthly Payment (Car 2)	Internet		
Car Insurance (Car 1 &/or Car 2)	Cable TV	Additional Cash +	
Gas	Streaming Services	Income Subtotal	
Other Transportation	Bundle Discount -	Savings -	
Repairs		Debts and Loans -	
Total	Total	Family Life -	
HEALTH	ENTERTAINMENT/HOBBIES	Home -	
Premium (Single or Family)	1.	Daily Living -	
Deductible (can be divided by 12)	2.		
Coverage (can be divided by 12)	3.	Transportation -	
Co-Pay		Health -	
Prescriptions		Communications -	
Vitamins			
No Insurance		Entertainment/Hobbies -	
		Expenses Subtotal	
Total	Total		
NY - 4		Mark and of Donlike a ser	
Notes:		Wheel of Reality + or -	
		Total	
		Under Budget +	
		Over Budget -	