BUDGET WORKSHEET

Name:		ADDITIONAL	CASH	HOME		
			Part-time Job		Home Option:	
Occupation: Court Clerk			Personal Loan (Full Amount)		Payment (Principal/Interest)	
					Taxes, Insurance & PMI*	
Spouse's Occupation: Facilites			Tota	ıl 💮	Rent	
Number of Children	: 1- Samanth	ıa	DEBTS AND I	LOANS	Renter's Insurance	
(11 months old)			Student Loans		Electricity & Heat	
IN	ICOME		Credit Cards	\$480	Water & Trash	
Monthly Net		\$2,730	Personal Loan (Monthly Amount	:)	Furniture	
		\$4,482			Home Decor	
			Tota	al		
	Total	\$7,212	SAVING	S	(*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	
List table here			(Compound Interest)		Dining Out (Select 1)	
List table here			Tota	al	Incidentals (1 or More)	
List table here			FAMILY L	IFE		
WHEE	OF REA	LITY	(If child is under 1-year, must do 1-3)			
Unexpected Expens	e -		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			
			Childcare			
Notes:			Additional Accessories			
1) Visit every table.			Pets (Optional)		Personal Care (1 or More)	
2) Total expenses for each section.			Church (Optional)			
3) Carry each total to back page final balance.			Charity (Optional)			
4) Meet with financia	al advisor to r	eview	-			
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 -