

Worksheet

Month _____ 20____

Goals for month:

Income for month (Net):

Source	Amount
_____	_____
_____	_____
_____	_____
Total	_____

Fixed Expenses Planned Actual

Housing

Rent/house payment	_____	_____
Taxes	_____	_____
Other	_____	_____

Utilities

Electricity	_____	_____
Gas/oil	_____	_____
Water	_____	_____
Trash	_____	_____
Telephone	_____	_____
Other	_____	_____

Insurance

Homeowner/renter	_____	_____
Health	_____	_____
Life	_____	_____
Car	_____	_____
Other	_____	_____

Installment payments Planned Actual

Savings

Amount set aside for irregular expenses	_____	_____
Regular expenses	_____	_____
Other	_____	_____

Total fixed expenses

Flexible Expenses Planned Actual

Food

Clothing

Household expenses

Medical Care

Education

Transportation Planned Actual

Personal

Recreation

Gifts, contributions

Other

Total flexible expenses _____

How did you do?

Total fixed expenses _____

Total flexible expenses _____

Total monthly expenses _____

Income _____

Expenses _____

Difference _____