

Budget Worksheet

Income & Expenses

Monthly Income	Amount
Employment	
Spousal Employment	
Rental Income	
Other Income	

Other Income	
Monthly Expenses	Amount
Residence	
Mortgage or Rent	
Upkeep (Cleaning, Landscaping, etc.)	
Maintenance & Repair	
Property Taxes	
Insurance	
Associations & Dues	
Utilities	
Gas	
Electric	
Water	
Trash	
Cell Phone(s)	
Home Phone	
Internet	
TV	
General Living	
Grocery	
Food	
Supplies	
Health & Beauty	
Vitamins & Supplements	
Clothing	
Coffee Shop	
Restarurants	
Entertainment	
Books	
Movies	
Subscriptions	
Fitness	
Fees (Gyms, Studios, etc.)	
Equipment	
Clothing	
Vacation & Travel	
Transportation	

Phone: (616) 871-0751

Savings	Balance
Retirement Account(s)	
Savings Accounts	
Brokerage and other	

Monthly Expenses	Amount
Healthcare	
Medical	
Premium	
Deductable	
Co-Pay	
Perscriptions	
Out-of-pocket	
Dental	
Premium	
Deductable	
Co-Pay	
Out-of-pocket	
Vision & Eye Care	
Premium	
Deductable	
Co-Pay	
Out-of-pocket	
Vehicles & Transportation	
Car/Truck payments	
Gas	
Insurance	
License & Reg	
Maintenance & Repair	
Pets	
Food & Suppliments	
Preventatives	
Vet	
Medications	
Other	
Other	
Charitable Contributions	
Religious	
Causes	
Gifts & Presents	
Family	
Friends	



Food & Accomodations