



HOUSING	
Rent/Mortgage	\$
Second Mortgage	\$
Taxes/Insurance	\$
Maintenance	\$
Other	\$
UTILITIES	
Electric	\$
Gas/Oil	\$
Water/Sewer	\$
Home Phone	\$
Cable/Satellite	\$
Internet	\$
Cell Phone	\$
Other	\$
TRANSPORTATION	
Car Loan/Lease	\$
Car Loan/Lease	\$
Gasoline	\$
Maintenance	\$
Auto Insurance	\$
FOOD & HOUSEHOLD GOODS	
Groceries	\$
Other	\$
INSURANCE (If not in Paycheck)	
Medical	\$
Life	\$
DEPENDANTS	
Childcare	\$
Child Support	\$
Alimony	\$
Tuition	\$
Garnishments	\$
Other	\$
MEDICAL	
Doctor/Dentist Bills	\$
Prescriptions	\$
SAVINGS	
Emergency Fund	\$
Set Aside Savings	\$
Retirement	\$
Total of Column	\$

MISCELLANEOUS	
Haircuts/Nails	\$
Gym/Sports/Hobbies	\$
Entertainment/Eat Out	\$
Coffee/Cigarettes	\$
Other	\$
SECURED LOANS	
Loan 1	\$
Loan 2	\$
Student Loan	\$
Tax Payments	\$
Other	\$
CREDIT CARDS	
Credit Card 1	\$
Credit Card 2	\$
Credit Card 3	\$
Credit Card 4	\$
Credit Card 5	\$

Total of Column	\$
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Total of Both Columns	\$
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Monthly Income
\$

Monthly Expenses
\$

What's Left Over
\$