# Budget Worksheet

| MONTHLY EXPENSES | CURRENT | PROPOSED |
|---|---|---|
| **HOUSING** | | |
| Rent/Mortgage | $ | $ |
| Gas/Electric (Avg) | $ | $ |
| Water/Sewer/Garbage | $ | $ |
| **OTHER LIVING EXPENSES** | | |
| Cell Phone | $ | $ |
| Internet/Cable | $ | $ |
| Groceries | $ | $ |
| Household Items | $ | $ |
| Health/Renters Ins. | $ | $ |
| Prescriptions/Doctor | $ | $ |
| Tuition | $ | $ |
| Textbooks/Supplies | $ | $ |
| Personal Care | $ | $ |
| Clothing | $ | $ |
| Restaurants/Fun | $ | $ |
| Sports/Hobbies/Gym | $ | $ |
| Vacation/Travel | $ | $ |
| Laundry/Dry | $ | $ |
| Cleaning Gifts/Cards | $ | $ |
| Pet Care | $ | $ |
| Donations | $ | $ |
| **TRANSPORTATION** | | |
| Car Payment | $ | $ |
| Gasoline | $ | $ |
| Car Maintenance | $ | $ |
| Car Insurance | $ | $ |
| Parking/Bus | $ | $ |
| **DEBT** | | |
| Credit Card Payments | $ | $ |
| Other | $ | $ |
| **SAVINGS** | | |
| Savings (Goals) | $ | $ |
| Savings (Emergency) | $ | $ |
| Other | $ | $ |
| **TOTAL FOR MONTH** | **$** | **$** |

| MONTHLY INCOME | NET (POST-TAX) |
|---|---|
| Job | $ |
| Allowance | $ |
| Other | $ |
| **TOTAL FOR MONTH $** | |

| THE BOTTOM LINE | |
|---|---|
| Monthly Net Income | $ |
| Monthly Expenses | - $ |
| Monthly Surplus/Deficit | = $ |

**Recommended budget percentages of your total income:**

Housing - 35%
Other Living Expenses - 25%
Transportation - 15%
Debt - 15%
Savings - 10%

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