

Monthly Budgeting Worksheet

Use this worksheet to determine and track your income/spending plan for each month. Once you have this information, log in to the Financial Avenue Budgeting course at www.financialavenue.org to learn more about budgeting and to create a budget that will help you meet your needs and fulfill your financial goals.

Total Income	<input type="text"/>
- Total Expenses	<input type="text"/>
= What's Left	<input type="text"/>

Month/Year:

MONTHLY NET INCOME

Fill in your net income. Net income = Income remaining after taxes. (Include income from work/job, investments, self-employment, consulting, education funds, gifts, child support/alimony, other)

	Week 1	Week 2	Week 3	Week 4	Week 5	Other	Income Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

MONTHLY EXPENSES

For your monthly expenses, fill in a budgeted amount. Then fill in when the expense occurs throughout the month. Expenses are categorized as fixed, flexible and periodic. A fixed expense (green) stays the same each month, while a flexible expense (blue) varies from month to month. Periodic expenses (yellow) typically are paid 1-4 times a year instead of monthly. To determine a monthly expense for a periodic or flexible expense, add up the amounts you paid for that expense over the last 12 months and divide the total by 12.

Expense Categories		Budgeted Amount	Due Date	1st Week	2nd Week	3rd Week	4th Week	5th Week/ Other	Total <small>(Should Equal Budgeted Amount)</small>
Housing	Rent/Mortgage								
	Trash/Sewer								
	Telephone/Internet								
	Property Taxes								
	Home/Rent Insurance								
	Home Maintenance								
	Electricity								
	Heating								
	Water								
	Other Housing								
	Total Housing								
Transportation	Car/Truck Payment								
	Parking								
	Licensing/Regis. Fees								
	Auto Insurance								
	Auto Maintenance								
	Fuel								
	Public Transportation								
	Other Transportation								
	Total Transportation								
Food	Meal Plans								
	Groceries								
	Dining Out								
	Beverages								
	Pet Food								
	Other Food								
	Total Food								
Debt Repayment	Student Loans								
	Personal Loans								
	Credit Cards								
	Other Debt								
	Total Debt Repayment								

*Note that listed expenses have been placed into typical fixed, flexible and periodic categories. You may adjust expenses and categories to fit your budget needs.

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Expense Categories		Budgeted Amount	Due Date	1st Week	2nd Week	3rd Week	4th Week	5th Week/ Other	Total
Entertainment	TV Service								
	Travel								
	Electronics								
	Movies								
	Music								
	Subscriptions								
	Books (Textbooks)								
	Hobbies								
	Other Entertainment								
	Total Entertainment								
Savings	Retirement								
	Emergency Fund								
	College								
	Special Events								
	Other Savings								
	Total Savings								
Health & Insurance	Health Insurance								
	Life Insurance								
	Pet Insurance								
	Long-term Care Ins.								
	Glasses/Contacts								
	Medical Visits								
	Prescriptions								
	Over-the-counter Meds.								
	Other Health & Ins.								
	Total Health & Ins.								
Clothing	Uniforms								
	Work								
	Casual								
	Accessories								
	Dry Cleaning/Alterations								
	Other Clothing								
	Total Clothing								
Personal & Family Care	Child Support								
	Alimony								
	Tuition								
	School Supplies								
	Daycare/Babysitters								
	Hair/Nail Care								
	Toiletries								
	Other Care								
	Total Pers. & Fam. Care								
Other	Memberships								
	Donations								
	Gifts								
	Advisor Services								
	Other Misc.								
	Total Other								
TOTALS									

*Note that listed expenses have been placed into typical fixed, flexible and periodic categories. You may adjust expenses and categories to fit your budget needs.