

Household Budget
Dollars Spent from After-Tax Income

You may enter the data as either monthly or annual expenses.

Housing & Utility Expenses	\$/Month	\$/Year
Rent		
Condominium Fees		
Property Taxes		
Cable TV/Satellite TV		
Internet/Wireless/Broadband Service		
Cell Phone		
Telephone		
Fax		
Computers, Software & Other Electronics		
Water		
Gas		
Oil		
Electricity		
Sewer		
Garbage		
Maintenance, Painting, Repairs, Etc.		
Cleaning/Maid Service		
Furnishings		
Appliances		
Other Housewares		
Fire Department/Ambulance Assessments		
Other City & Town Assessments		
Lawn & Yard Care		
Snow Removal		
Swimming Pool Care		
Other:		
Subtotal		

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Debt Repayment	\$/Month	\$/Year
Home Mortgage		
Home Equity Loans & Lines of Credit		
Mortgages on Other Real Estate		
Auto Loans & Leases		
Credit Cards		
Student Loans		
Personal Loans		
Other:		
Subtotal		

Food Expenses	\$/Month	\$/Year
Groceries		
Restaurants & Takeout Meals		
Lunches		
Other:		
Other:		
Subtotal		

Clothing & Footwear Expenses	\$/Month	\$/Year
Purchases		
Dry Cleaning		
Laundry		
Mending & Tailoring		
Shoeshine & Cobbling		
Other:		
Subtotal		

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Transportation Expenses	\$/Month	\$/Year
Auto Maintenance		
Parking & Garage		
Public Transportation		
Tolls		
Taxis		
Gasoline, Diesel & Other Fuels		
Cleaning, Waxing, Etc.		
Drivers' Licenses		
Vehicle Registration		
Excise/Property Taxes		
Other:		
Subtotal		

Child/Dependent Expenses	\$/Month	\$/Year
Daycare		
Baby-sitting		
Nursing/Home Health Care/Respite Care		
Tutoring		
Music/Art Lessons		
Club & Athletic Membership		
Other:		
Subtotal		

Education Expenses	\$/Month	\$/Year
Tuition		
Room & Board		
Books, Supplies & Equipment		
Lab, Testing & Other Fees		
Campus Parking		
Tutoring		
Clubs, Fraternities, Sororities, Etc.		
Other:		
Subtotal		

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Medical Expenses	\$/Month	\$/Year
Hospital		
Primary Physician		
Medical Specialists		
Dentist		
Chiropractor		
Prescriptions & Other Medications		
Insurance Co-Payments		
Uninsured Tests, X-Rays, Etc.		
Eyeglasses		
Hearing Aids		
Dental Braces & Other Orthodontics		
Other Medical/Dental Devices & Equipment		
Other:		
Subtotal		

Insurance Expenses	\$/Month	\$/Year
Homeowner's Insurance		
Rental Insurance		
Flood Insurance		
Automobile Insurance		
Motorcycle Insurance		
Boat Insurance		
Recreational Vehicle Insurance		
Other Vehicle Insurance		
Special Personal Property Insurance		
Personal Liability Insurance		
Life Insurance		
Health Insurance and/or Medicare		
Medicare Supplement (aka, Medigap) Insurance		
Disability Insurance		
Long-Term Care Insurance		
Other:		
Subtotal		

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Personal Care Expenses	\$/Month	\$/Year
Hair Care, Hair Stylist, Etc.		
Manicure, Pedicure, Etc.		
Massage, Acupuncture, Etc.		
Other Cosmetic Care & Treatments		
Toiletries (Example: Soap, Toothpaste, Razors, Etc.)		
Other:		
Subtotal		

Entertainment & Recreation Expenses	\$/Month	\$/Year
Vacations		
Travel		
Sports		
Fitness		
Music		
Movies/Theater		
Books, Magazines & News		
Club Memberships		
Hobbies		
Other:		
Subtotal		

Gifts & Contributions	\$/Month	\$/Year
Personal Gifts		
Charitable Donations		
Other:		
Subtotal		

Pet Expenses	\$/Month	\$/Year
Food		
Veterinarian		
Board & Care		
Supplies		
Other:		
Subtotal		

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Other Expenses	\$/Month	\$/Year
Pocket Change Spent		
ATM Withdrawals Spent		
Other:		
Other:		
Other:		
Subtotal		

Total Expenses

Per Month
Per Year