

# MONTHLY BUDGET

1st Loan#

Last 4 of SS#

## INCOME - NET

Applicant Income	
Co-applicant Income	
Social Security/SSI/Disability	
Child Support	
Food Stamps/FIA income	
Other Income	
<b>TOTAL MONTHLY INCOME</b>	<b>\$ -</b>

## FIXED EXPENSES

Housing ~ Rent/Mortgage	
Home Owner Association Fees	
Car Loan #1	
Car Loan #2	
Car Insurance (for two vehicles)	
Student Loan	
Personal Loan/Line of Credit	
Child Support	
Child Care expenses	
Savings	
Other Fixed Expense	

## FLEXIBLE EXPENSES

Food ~ Groceries	
Inbetween grocerys expenses	
Toiletries/Cosmetics	
Natural Gas/Propane	
Electric	
Trash Removal	
Water Bill	
Telephone	
Cell Phone	
Automobile Gas, Oil, Antifreeze	
Auto Repair, Maintenance	
Internet	
Cable/Movies/Movie Rental	
Laundry/Dry Cleaning	
Activities/Going Out	
Dinners Out	
Lunches Out	
Kids School Lunches	
Dues/Subscriptions	
Medical Insurance-(not taken out of paycheck)	
Money Orders or Cashiers Checks	
Bank or Checking Fees, ATM Fees, Check Cashing Fees, Overdraft fees	
Rent to Own	
Hair Care	
Nail Care	
Clothing	

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Cigarettes	
Charity/Tithing	
Education	
Pets	
Allowance/Children's Activities	
Other Flexible Expenses	

## OCASIONAL EXPENSES

Property Taxes (If not included in mortgage)	
HomeOwners Insurance (If not included in mortgage)	
Medical	
Dental	
Vision	
Ongoing Medical	
Birthdays	
Christmas/Holidays	
Vacation	

## DEBT REDUCING EXPENSES

Credit Card #1	
Credit Card #2	
Credit Card #3	
Credit Card #4	
Credit Card #5	
Credit Card #6	
Credit Card #7	
Credit Card #8	
Credit Card #9	
Credit Card #10	
Other Debt Reducing Expenses	
<b>TOTAL EXPENSES</b>	<b>\$ -</b>

**Final Calculations**

<b>TOTAL MONTHLY INCOME</b>	\$	-
<b>TOTALMONTHLY EXPENSES</b>	\$	-
<b>DIFFERENCE ~ GAIN/(LOSS)</b>	\$	-

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Signature	Printed Name	Date
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Signature	Printed Name	Date
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