Name: _____ Date Prepared: _____

Net Income

Salary #1	
Salary #2	
Other Income	
TOTAL INCOME	

Fixed Expenses

Rent/Mortgage	
Second Mortgage	
Car Payment 1	
Car Payment 2	
Student loan(s)	
Child Support / Alimony	
Taxes (owing)	
Emergency savings; first goal =	
TOTAL FIXED EXPENSES	

Flexible/Variable Expenses

Groceries	
Meals out	
School lunches	
School tuition and supplies	
Electricity	
Natural/LP Gas / Oil	
Water / sewage / garbage	
Telephone / cell phone / pager	
Family clothing	
Dry cleaning / laundry	
Home cleaning supplies	
Gasoline	
Bus fares / ride shares / taxi / parking	
Barber / beauty shop	
Personal care (shamp,makeup, perf, shav)	
Comp. hardware, software, ink etc.	
Books / newspapers / magazines	
Medical (doctor, hospital, tests)	
Drugs / medications	
Dental & Optical	
Charitable Contributions	
Cable / Satellite TV	
Vacations / travel	
Entertainment / recreation	
Gifts / parties / holidays	
Cigarettes / Tobacco	
Alcohol	
Babysitter	
Hobbies / club dues	
Banking charges (checks, money orders)	
Postage	
Diapers / Formula / Baby supplies	
Allowances	
Home maintenance	
Lawn / pool maintenance / home security	
Lottery	
Pet care (vet, food, toys, treats, litter, pills)	
Internet	
Other (note)	
TOTAL FLEXIBLE/VARIABLE EXPENSES	

Periodic Expenses

Property Taxes	
Life insurance	
Health and accident insurance	
Auto insurance 1	
Auto insurance 2	
Auto tags / registration / inspection	
Auto 1 maintenance (oil changes, tires, misc.)	
Auto 2 maintenance	
TOTAL PERIODIC EXPENSES	

Total monthly net income	
Monthly mortgage / rent	
Total adjusted monthly living expenses	
Net Monthly Gain (Loss) Before Debt Repayment	

Unsecured Debts (list credit cards and any other)	**Monthly**
TOTAL UNSECURED DEBT PAYMENTS	

Net Monthly Gain (Loss) After Debt Repayment	

Notes:

KB updated 01/22/2014