

MONTHLY SPENDING PLAN

INCOME SOURCES

Salary 1 (take home pay)*	_____
Salary 2 (take home pay)*	_____
Other Income	_____
Other Income	_____
1. Minus Tithes & Charitable Giving	(_____)
TOTAL SPENDABLE INCOME	_____

EXPENSES

		% of Spendable Income
2. Savings/Investments	_____	_____
3. Debts		
Credit card 1	_____	
Credit card 2	_____	
Credit card 3	_____	
Student loan(s)	_____	
Other _____	_____	
Other _____	_____	
Other _____	_____	
TOTAL DEBTS	_____	_____
3. Housing		
Mortgage or rent	_____	
Homeowners insurance	_____	
Real estate taxes	_____	
Home maintenance	_____	
Lawn care	_____	
Other	_____	
TOTAL HOUSING	_____	_____
4. Utilities		
Electricity	_____	
Natural gas	_____	
Water/sewer/trash	_____	
Telephone (home)	_____	
Telephone (cell)	_____	
Internet service	_____	
TOTAL UTILITIES	_____	_____
5. Food		
Groceries**	_____	_____

6. Transportation			
Auto payment 1	_____		
Auto payment 2	_____		
Auto insurance	_____		
Auto maintenance	_____		
Gasoline**	_____		
Auto tags/licenses	_____		
Auto replacement	_____		
TOTAL TRANSPORTATION	_____	_____	_____
7. Insurance			
Medical	_____		
Life	_____		
Disability	_____		
Other	_____		
TOTAL INSURANCE	_____	_____	_____
8. Medical / Health			
Doctors (copays / bills)	_____		
Medicines	_____		
Dentists (copays / bills)	_____		
Vision (copays / bills)	_____		
HAS / FSA contributions	_____		
Other	_____		
TOTAL MEDICAL	_____	_____	_____
9. Clothing			
Adults**	_____		
Children**	_____		
Laundry/Dry Cleaning**	_____		
TOTAL CLOTHING	_____	_____	_____
10. Household / Personal			
Gifts**	_____		
Christmas (incl. gifts)	_____		
Hair care**	_____		
Cosmetics**	_____		
Pet expenses**	_____		
Education expenses	_____		
Bank charges	_____		
Child support/alimony	_____		
Allowances (spending money):			
Adults **	_____		
Children**	_____		
Childcare**	_____		
Other	_____		
Other	_____		
TOTAL PERSONAL	_____	_____	_____

11. Entertainment		
Eating out**	_____	
Cable television	_____	
Movies, etc.**	_____	
Books, subscriptions	_____	
Baby sitters**	_____	
Health Club	_____	
Sports leagues	_____	
Hobbies	_____	
Vacations	_____	
Other	_____	
TOTAL ENTERTAINMENT	_____	_____
TOTAL EXPENSES	_____	<u>100%</u>

INCOME VS. EXPENSES

Net Spendable Income	_____
Less Expenses	(_____)
Difference	=====

* see special instructions if self-employed or taxes are not deducted from your pay

** consider using cash "envelope system" for these expenses