Monthly Budget

Month _____ **Year** _____

Income

Source	Budget	Actual	Difference
Paycheck 1			
Paycheck 2			
Side income			
Other			
Total income			

Expenses

Category	Budget	Actual	Left in budget
Rent / mortgage			
Utilities (electric, gas, water)			
Phone and internet			
Groceries			
Dining out			
Transportation (gas, transit)			
Car payment			
Insurance (car, health, renters)			
Debt payments			
Savings / emergency fund			
Retirement contributions			
Subscriptions			
Personal care			
Entertainment			
Clothing			
Gifts and donations			
Kids / pets			
Miscellaneous			
Total expenses			

Total income (actual) _____

Total expenses (actual) _____

Left over

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NOTES AND GOALS FOR NEXT MONTH