Zero-Based Budget

Month _____ **Year** _____

Income this month

Source	Amount
Total income	

Assign every dollar

Group	Item	Assigned
Giving	Donations, tithing	
Saving	Emergency fund	
Saving	Retirement	
Housing	Rent / mortgage	
Housing	Utilities	
Food	Groceries	
Food	Restaurants	
Transportation	Gas and maintenance	
Transportation	Car payment / transit	
Insurance	Health, car, life	
Debt	Credit cards / loans	
Personal	Phone, subscriptions, personal care	
Lifestyle	Entertainment, hobbies	
Sinking funds	Gifts, car repairs, travel	
Other		
Total assigned		

Total income _____

Total assigned _____

Left to assign (aim for $0)