

Budget Book Forms

Form 1 – Monthly Expenses and Net Spendable Income

Form 2 – Monthly Budget Summary Sheet

Form 3 – Budget Category Ledger Sheet

Form 4 – Savings Distribution Sheet

Form 5 – Debt Repayment Plan #1

Form 5a – Debt Repayment Plan #2

Form 6 – Creditor List

Form 7 – House Mortgage Tracking Sheet

Form 8 – Investment Distribution Sheet

MONTHLY EXPENSES

NET SPENDABLE INCOME

(Percentages are of N.S.I.)

\$ _____

4. Savings (5-10%)

Emergency Fund _____ ()
Purchases _____
Other _____

5. Housing (35-45%)

Mortgage (rent) _____ ()
Insurance _____
Taxes _____
Assoc. Dues _____
Sanitation _____
Pest Control _____
Repairs/Maint. _____
Electricity _____
Gas _____
Water _____
Telephone _____
Cable _____
Other _____

6. Food (5-15%)

Grocery _____ ()
Other _____
Other _____

7. Auto (10-15%)

Gas & Oil _____ ()
Insurance _____
Licenses/Taxes _____
Other _____
Other _____
Other _____

8. Clothing (4-5%)

Adults _____ ()
Children _____
Care/Cleaning _____

9. Medical/Health (4-5%)

Disability Ins. _____ ()
Health Ins. _____
Doctor _____
Dentist _____
Eye Care _____
Drugs _____
Other _____

10. Life Insurance (2-5%)

_____ ()

11. Personal (5-10%)

Child Care _____ ()
Beauty/Barb. _____
School Tuit. _____
School Supp. _____
Dues _____
Gifts (others) _____
Subscriptions _____
Miscellaneous _____
Cash _____
Other _____
Other _____

12. Ent./Rec. (5-10%)

Vacation _____ ()
Eating Out _____
Baby Sitting _____
Other _____

13. Debts (0-5%)

Credit Cards _____ ()
Student Loan _____
Car Payment _____
Car Payment _____

14. _____

15. _____

How to compute:
NET SPENDABLE INCOME
(N.S.I.)

GROSS MONTHLY HOUSEHOLD INCOME _____

Salary #1 _____
Salary #2 _____
Interest _____
Other _____
Other _____
Other _____

MINUS:

1. CHARITABLE GIVING _____

Tithe (10%) _____
Offering _____
Other _____
Other _____

2. PRE-TAX SAVINGS _____

401(k) _____
403(b) _____
IRA _____
IRA _____
Other _____
Other _____

3. TAXES _____

Federal Tax _____
State Tax _____
FICA _____
Other _____

EQUALS:

NET SPENDABLE INCOME

(Transfer to Top of Next Page)

		BUDGETED INCOME			
MONTH	→				
GROSS INCOME	→				
Charitable Giving*					
Pre-Tax Savings					
Tax*					
NET SPENDABLE					
Savings*	(5-10%)				
Housing*	(35-45%)				
Food*	(5-15%)				
Auto*	(10-15%)				
Clothing	(4-5%)				
Medical/Health	(4-5%)				
Life Insurance	(2-5%)				
Personal	(5-10%)				
Entertainment/Recreation	(5-10%)				
Debts	(0-5%)				
Other					
Other					

FORM 2

CREDITOR LIST

(Include Collection Agencies and Lawyers)

Name _____

Address _____

City _____

Zip Code _____ Acct # _____

Telephone # _____

Name _____

Address _____

City _____

Zip Code _____ Acct # _____

Telephone # _____

Name _____

Address _____

City _____

Zip Code _____ Acct # _____

Telephone # _____

Name _____

Address _____

City _____

Zip Code _____ Acct # _____

Telephone # _____

Name _____

Address _____

City _____

Zip Code _____ Acct # _____

Telephone # _____

Name _____

Address _____

City _____

Zip Code _____ Acct # _____

Telephone # _____

Name _____

Address _____

City _____

Zip Code _____ Acct # _____

Telephone # _____

Name _____

Address _____

City _____

Zip Code _____ Acct # _____

Telephone # _____

FORM 6

