

# Household Budget Worksheet

Name: \_\_\_\_\_

Date: \_\_\_\_\_

INCOME	Monthly Net	Comments	
Employment	\$		
Employment			
Child Support			
FIP/TANF			
Pension			
SSA/SSI/SSDI			
Unemployment			
VA Benefits			
From friends/family			
<b>TOTAL INCOME</b>	\$		
EXPENSES	Monthly	Priority	Comments
Rent/Mortgage	\$		
Property taxes			
House/renters insurance			
Phone			
Gas/Utilities			
Electric/Utilities			
Water/sewer/trash			
Child Support Due			
Cable/internet			
Car payment/transportation			
Car insurance			
Car repairs/maintenance			
Car license/tags			
Gas for car			
Groceries			
Eating out			
Hygiene			
Diapers			
Childcare			
Health insurance			
Medications			
Life insurance			
Loans formal			
Loans informal			
Money to friends/family			
Installment payments			
Credit card payments			
Clothing			
Pets (food, vet, medicine)			
Entertainment			
Cigarettes/alcohol/addictions			
<b>TOTAL INCOME</b>	\$		

Specialist: \_\_\_\_\_ Review On: \_\_\_\_\_