Monthly Household Budget Worksheet - List your monthly payments/expenses

Your monthly budget is an important part of helping you to best manage your money. It also helps us to determine how we can help find opportunities to assist with keeping you in your home. Please review and complete each item carefully.

<u>IMPORTANT</u>: If you see an area in which you can reduce a monthly expense, please put a check-mark in the box to the right of the amount; this will help you to find possible reductions in your monthly expenses (see bottom of page), and it will help us to assist you. By working together, we can help you to stay in your home.

	Monthly		Monthly
A. Housing	Payment	E. Food	Payment
Mortgage or rent		Groceries	
Second mortgage (home equity)		Dining out	
Homeowners association fees		Other	
Property taxes		Subtotal of Section E	\$
Maintenance or repairs			
Phone, incl. cell phone(s), pager, etc.		F. Family (incl. Children)	
Utilities (water, gas, electricity, etc.)		Medical	
Cable/satellite programming		Clothing	
Waste removal		School tuition	
Mortgage(s) on other home(s)		School supplies	
Other		Organization dues or fees	
Subtotal of Section A	\$	Child care	
·		Toys/games	
E. Transportation		Other	
Vehicle 1 (loan payment)		Subtotal of Section F	\$
Vehicle 2 (loan payment)			<u> </u>
Public transportation (bus, taxi, train, etc.)		G. Insurance	
Vehicle insurance (all vehicles)		Home (including Flood Insurance)	
Licensing		Health (Medical, Dental, Vision, etc.)	
Fuel & maintenance		Life	
Other		Other	
Subtotal of Section E	•	Subtotal of Section G	•
Shotolar of Section 2	Ψ	Showing of Section 3	Ψ
C. Other Debt		H. Legal	
Credit Card # 1		Attorney	
Credit Card # 2		Alimony	
Credit Card # 3		Payments on lien or judgment	
Unsecured (Personal) Loan(s)		Other	
Student Loan(s)		Subtotal of Section H	\$
Other (list)		,	
Subtotal of Section C	\$	I. Savings or Investments	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·	Retirement account(s)	
D. Personal		Investment account(s)	
Entertainment (movies, music, etc.)		College savings	
Household toiletries and supplies		Other	
Medical		Subtotal of Section I	8
Grooming (hair, nails, etc.)		2	
Clothing (including dry cleaning)		J. Taxes	
Health club or other club fees/dues		Federal	
Charitable contributions		State	
Pet expenses (food, medical, etc.)		Local	
Other		Other	
	0	Subtotal of Section J	\$
Subtotal of Section D			*
Subtotal of Section D			
	\$	Possible reductions in monthly expenses	

Sionature

Date