

INSERT SECTION

DAILY EXPENDITURES

TRACKING SHEETS

EXPENSE WORKSHEET

INCOME WORKSHEET

Record Of Daily Expenditures

MONTH _____

YEAR _____

Date		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	1st Half Total	
Fixed																			
	Savings																		
	Food at Home																		
	Meals on Job																		
	School Lunches																		
	Dinner Out																		
	Electricity																		
	Gas/Heating																		
	Water/Sewage/Garbage																		
	Telephone																		
	Clothing																		
	Uniforms																		
	Cleaning and Laundry																		
	Home Cleaning Supplies																		
	Gas/Oil/Lube																		
	Bus Fares/Ride Share																		
	Child Care																		
	Grooming																		
Variable	Books/Newspaper/ Magazines																		
	Movies/Sporting Events																		
	Parties/Clubbing/ Beverages																		
	Cigarettes/Tobacco/ Alcohol																		
	Baby Sitter																		
	Hobbies																		
	Books, CDs, DVDs																		
	Doctor & Hospital																		
	Dentist																		
	Medicine																		
		Periodic Expenses																	
		Total																	

DIRECTIONS

- Gather information about how your money was spent during the past month from your checkbook register, receipts, credit card bills, online statements, and any other financial records you have. This will help you get the most accurate information.
- If you do not have complete financial records for the past month, begin recording all expenditures for the next several weeks on the Money Tracking Sheet and the Credit Card Tracking Sheet.

Record Of Daily Expenditures

MONTH

YEAR

Date	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total for Month	
Fixed																	
Savings																	
Food at Home																	
Meals on Job																	
School Lunches																	
Dinner Out																	
Electricity																	
Gas/Heating																	
Water/Sewage/Garbage																	
Telephone																	
Clothing																	
Uniforms																	
Cleaning and Laundry																	
Home Cleaning Supplies																	
Gas/Oil/Lube																	
Bus Fares/Ride Share																	
Child Care																	
Grooming																	
Variable	Books/Newspaper/ Magazines																
	Movies/Sporting Events																
	Parties/Clubbing/ Beverages																
	Cigarettes/Tobacco/ Alcohol																
	Baby Sitter																
	Hobbies																
	Books, CDs, DVDs																
	Doctor & Hospital																
	Dentist																
	Medicine																
	Periodic Expenses																
	Total																

- Transfer these daily totals to the Record of Daily Expenditures (DE).
- Complete the Expense Worksheet after you have at least 30 days of expenditure information.

Expense Worksheet		From Record of DE	Adjusted	1st Month		2nd Month		3rd Month		4th Month		5th Month	
				Budget	Actual								
FIXED	Rent or Mortgage Payment												
	Home Equity/2nd Mortgage												
	Life/Health												
	Home/Renter's Insurance												
	Auto Insurance												
	Child Support												
	Charitable/Worship Donations												
	Monthly Debt Payments												
	Emergency Fund Savings												
	Savings for Goals												
	Total Fixed Expenses												
VARIABLE	Food at Home (Groceries)												
	Meals & Snacks on Job												
	School Lunches												
	Meals Out												
	Electricity												
	Gas/Heating												
	Water/Sewer/Garbage												
	Phone/Long Distance/Cellular												
	Cable/Satellite												
	Internet Charges												
	Gasoline												
	Bus Fares/Parking/Tolls												
	Clothing												
	Uniforms												
	Dry Cleaning/Laundromat												
	Cleaning Supplies												
	Grooming & Personal Items												
	Children's Allowance												
	Baby Sitter												
	School/Tuition/Activities												
	Cigarettes/Tobacco/Alcohol												
	Recreation												
	Books/Newspapers/Magazines												
	Video/Book/DVD												
	Hobbies/Lessons												
	Doctor Visits												
	Dentist												
Medicine													
Bank Charge/ATM													
Postage													
Total Variable Expenses													
PERIODIC	Back to School												
	Car Repairs/Tires												
	Tags/Inspection												
	Gifts - Holiday												
	Appliance Repair												
	Home Maintenance/Repair												
Total Periodic Expenses													
TOTAL MONTHLY EXPENSES													
MONTHLY NET INCOME													
SURPLUS/DEFICIT													

INSTRUCTIONS

● Examine the first column, "From Record of DE" (Daily Expenditures), and decide if the amounts in each category are the same as the amounts you plan to spend during the next 12 months. ● Adjust expenses

that you think may increase or decrease during this year. Try to anticipate the actual month when purchases will occur. Fill in the appropriate amount each month in the Budget column of the Expense Worksheet. ● Cross out categories that do not apply and add new category

names if you need additional lines. ● Purchases that you are planning to make by credit card should be entered by category name. For example, clothing to be purchased on a credit card should be listed as Clothing.

Income Worksheet

	Paycheck 1	Paycheck 2	Paycheck 3	Paycheck 4	Total	Notes
1 Sources of Paychecks						
2 Monthly Gross Earned Income						
3 Deductions						
Federal Income Tax						
FICA/Retirement						
Medical Insurance						
Life Insurance						
Dental Insurance						
Co. Stock Purchase						
Payroll Deduction Saving						
Union Dues						
Child Support						
Other						
4 Monthly Net Earned Income						
5 Other Monthly Income						
6 Additional Periodic Income						
7 Total All Monthly Net Income						

STEP 1 Sources of Paychecks

List all sources of regular earned monthly income of all individuals living in the household involved in the family budget. This should include full-time, part-time, and self-employment income.

STEP 2 Monthly Gross Earned Income

List the amount of monthly income received before deductions for each earner. If you are paid weekly, figure monthly income by dividing total annual income by 52, and multiplying by 4.33. If you are paid every other week, figure monthly income by dividing total annual income by 26, and multiplying by 2.16. This amount will equal an average monthly income.

STEP 3 Deductions

List all monthly deductions from each source of income. Loans owed to an employer and/or credit union should be listed on the Liabilities section of the Net Worth Statement on [page 8](#) and on the Debt Load Worksheet on [page 29](#).

STEP 4 Monthly Net Earned Income

Subtract all deductions from the monthly gross earned income to arrive at the monthly net earned income.

STEP 5 Other Monthly Income

List monthly income from other sources. Remember, this is income that is received on a regular basis even though it may not be from employment. Examples: Temporary Assistance to Needy Families, Alimony, Social Security, Disability Compensation, Industrial Compensations, Annuities, Stock Dividends, Child Support, Rentals, Royalties, Allotments, Boarders, etc.

STEP 6 Additional Periodic Income

List extra paychecks, bonuses, income tax returns, etc., (divided into monthly amount).

STEP 7 Total All Monthly Net Income From All Sources

Add Steps 4, 5, and 6 together for the total monthly net income. If total net income from all sources is NOT SUFFICIENT to accomplish your goals, look for ways of revising income and/or the expenses which are deducted from your pay. Examples: Federal income tax exemptions, insurance coverage, savings, etc.