

Monthly Budget

Income

Description	Amount	Date Received
Income #1	_____	_____
Income #2	_____	_____
Income #3	_____	_____
Income #4	_____	_____
TOTAL	_____	_____

Expenses

Description	Amount	Date Due
Mortgage	_____	_____
Electric Bill	_____	_____
Gas Bill	_____	_____
Water Bill	_____	_____
Cell Phone	_____	_____
Auto Insurance	_____	_____
Gasoline	_____	_____
Bus / Parking Fees	_____	_____
Groceries	_____	_____
Household Repair	_____	_____
Auto Repair	_____	_____
Other Debt*	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTAL	_____	_____

Balance

INCOME - EXPENSES = ZERO
 - = 0

*Transfer from Debt Snowball Form.

Monthly Budget

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Other Debt*	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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TOTAL	_____	_____

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