Budget
Practical Financial Workbook

Instructions:

1. Save this file to your computer under a different file name, such as "MyName-Finances-Year".XLS.

2. Please input your data in the "yellow" areas only.

3. The worksheets have been provided to you with "protected" data fields. If you need to make adjustments t or tax rates, please save your file, then "unprotect" the appropriate sheet(s) by using the password "2015"

4

ɔ any formulas
(without quotes).

personal and spiritual goals.

ebt.
ur money is going.
or non-monthly expenses.

e percentage guideline for your Percentage Spending Plan figures.
situation.
and begin making adjustments until you have a balanced budget.

Spending Plan
ıow every dollar will be spent.
noney that you receive.
nance Budget and used for any and all categories for which you want more specific details on spending than w
. Of course, you will need to balance the recommendation with what your budget allows.
ınd obtain cash.
u are making in maintaining your budget.

what the Spending Tracker provides.

Quit Claim Deed

This Quit Claim Deed, made the _______ day of ____________________
From: ____
To: The Lord

I (we) hereby transfer to the Lord the ownership of the following possessions:

Witnesses who hold me (us) accountable in the recognition of the Lord's ownership:

Stewards of the possessions abo

This instrument is not a binding legal document and cannot be used to transfe ve:

r property.

Financial Goals for the ______________

Category	Specific Goal
Savings	Ex: We will saved $5/week to replace lamp
Debt Retirement	Ex. We will reduce our consumer debt by $100/month until it is gone
Offering	Ex. We will give an additional $25/month to the church for missionarey work
Personal Goals	
Spiritual Goals	

__________ family

Time Frame	Goal Successfully Met
6 weeks	1-Jun
Monthly	1/31, 2/28, 3/31, 4/31
Ongoing as God provides	1/31, 2/28

PERSONAL FINANCIAL STATEMENT

Date:		
Assets **(Present Market Value)**	**Amount**	
Cash On Hand/Checking Account		
Savings		
Stocks and Bonds		
Cash Value of Life Insurance		
Coins		
Home		
Other Real Estate		
Mortgages/Notes Receivable		
Business Valuation		
Automobiles		
Furniture		
Jewelry		
Other Personal Property		
Pension/Retirement		
Other Assets		
Other Assets		
Other Assets		
Other Assets		
Total Assets:		**$ -**
Liabilites **(Current Amount Owed)**	**Amount**	
Credit Card Debt		
Automobile Loans		
Home Mortgages		
Personal Debt To Relatives		
Business Loans		
Educational Loans		
Medical/Other Past Due Bills		
Life Insurance Loans		
Bank Loans		
Other Debts and Loans		
Other Debts and Loans		
Other Debts and Loans		
Other Debts and Loans		

Total Liabilities:	**$ -**
NET WORTH (Total assets minus total liabilities)	**$ -**

DEBT LIST [1]

Date:						
	Describe What Was Purchased	Monthly Payments	Balance Due	Scheduled Pay Off Date	Interest Rate	Payments Past Due
CREDITOR						
TOTALS		$ -	$ -			
AUTO LOANS						
TOTAL AUTO LOANS		$ -	$ -			
HOME MORTGAGES						
TOTAL HOME MORTGAGES		$ -	$ -			
BUSINESS/INVESTMENT DEBT						
TOTAL BUSINESS/INVESTMENT DEBT		$ -	$ -			

DEBT REPAYMENT SCHEDULE

Creditor:		Date:	
Describe What Was Purchased:			
Amount Owed:		Interest Rate:	
Total # of Payments:		Monthly Payment:	

Date Due:	Amount Paid	Payments Remaining	Balance Due
	$ -	-1	$ -
	$ -	0	$ -
	$ -	0	$ -
	$ -	0	$ -
	$ -	0	$ -
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Monthly Budget

Month		Year													
Category	INCOME	TITHE/ GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	ENTERTAINMENT RECREATION	CLOTHING	SAVINGS	HEALTH & WELLNESS	MISC.	INVEST.	SCHOOL/ CHILD CARE
ALLOCATED AMOUNT															
Date															
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
16															
17															
18															
19															
20															
21															
22															
23															
24															
25															
26															
27															
28															
29															
30															
31															
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget															
Year to Date BUDGET															
Year to Date ACTUAL															
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

	This Month			Year to Date	
BUDGET SUMMARY	Total Income	$ -		Total Income	$ -
	Minus Total Expenses	$ -	=	Minus Total Expenses	
	Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -

Computing The Variable Expenses			
Date:			
Annual Expense Items	**Estimated Yearly Cost**	**/ 12 =**	**Estimated Cost Per Month**
1. Vacation			$ -
2. Dentist			$ -
3. Doctor			$ -
4. Automobile			$ -
5. Life Insurance			$ -
6. Health Insurance			$ -
7. Auto Insurance			$ -
8. Home Insurance			$ -
9. Clothing			$ -
10. Investments			$ -
11. Other			$ -
12. Other			$ -
13. Other			$ -
14. Other			$ -
15. Other			$ -

Estimated Spending Plan - Current [1]

Monthly Income

GROSS MONTHLY INCOME	***Amount***	***$ -***
Monthly Salary		
Interest Income		
Dividends		
Commissions		
Bonuses/Tips		
Retirement Income		
Net Business Income		
Other Income		

LESS

Category 1 - Tithe/Giving (monthly)	***Amount***	***$ -***
The Local Church		
The Poor		
Other Ministries		
Other Giving		

Category 2 - Taxes (monthly)	***Amount***	***$ -***
Federal		
Social Security (FICA)		
Medicare		
State Taxes		
Local Taxes		
Other		
Other		

NET SPENDABLE INCOME (monthly)	***Amount***	**$ -**

Monthly Living Expenses

Category 3 - Housing (monthly)	***Amount***	***$ -***
Mortgage(s) (from Debt List)	$ -	
Rent		
Insurance		
Property Taxes		
Electricity		
Gas		
Water		
Sanitation		
Telephone / Cell phone		
Maintenance		
Cable TV / Internet Service		
Other		

Category 4 - Food (monthly)	***Amount***	***$ -***
Grocery		
Other		

Category 5 - Transportation (monthly)	*Amount*	*$ -*
Auto Payment(s) (from Debt List)	$ -	
Gas & Oil		
Auto Insurance		
Licenses & Taxes		
Maintenance		
Replacement		
Other - Tolls/Parking/Transit Fares		

Category 6 - Insurance (monthly)	*Amount*	*$ -*
Life		
Health		
Disability		
Other		

Category 7 - Debts (monthly)	*Amount*	*$ -*
0	$ -	
0	$ -	
0	$ -	
0	$ -	
0	$ -	
0	$ -	
0	$ -	
0	$ -	
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	$ -	
	$ -	
	$ -	
	$ -	
	$ -	
	$ -	
Total Business/Investment Debt (from Debt List)	$ -	
Total Other (NOT on Debt List)		

Category 8 - Entertainment & Recreation (monthly)	*Amount*	*$ -*
Eating Out / Lunches		
Baby Sitters		
Activities / Trips		
Vacation		
Pets		
Other		

Category 9 - Clothing (monthly)	*Amount*	*$ -*
Children's Clothing Needs		
Husband/Wife Clothing Needs		
Other		

Category 10 - Savings (monthly)	***Amount***	***$ -***
Savings Account		
Credit Union		
Other		

Category 11 - Health & Wellness (monthly)	***Amount***	***$ -***
Doctor		
Dentist		
Prescriptions		
Eye Glasses / Contacts		
Other		

Category 12 - Miscellaneous (monthly)	***Amount***	***$ -***
Toiletries / Cosmetics		
Beauty / Barber		
Laundry / Cleaning		
Allowances		
Subscriptions		
Gifts (including Christmas)		
Cash		
Other		

Category 13 - Investments (monthly)	***Amount***	***$ -***
401k/403b plans		
College Funds		
Stocks, Bonds, Mutual Funds		
Real Estate		
Other		

Category 14 - School/Child Care (monthly)	***Amount***	***$ -***
School Tuition		
School Books, Supplies, Materials, etc		
Transportation		
Day Care		
Tutoring, Lessons for Music, Dance, etc		
Other		

Total Living Expenses	**$ -**

INCOME vs. LIVING EXPENSES

Net Spendable Income	**$ -**
Less Total Living Expenses	**$ -**
Surplus or Deficit	**$ -**

Suggested Percentage Guidelines For Family Income

(Married with 2 Children)

GROSS HOUSEHOLD INCOME:	25,000	35,000	45,000	55,000	85,000	125,000
1. Tithe/Giving	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%
2a. Taxes: Federal 1						
2b. Taxes: Social Security						
2c. Taxes: Medicare						
2d. Taxes: State 1						
2e. Taxes: Other 1						
Total Taxes: 2	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Net Spendable Income percentages below add to 100%

NET SPENDABLE INCOME:	22,500	31,500	40,500	49,500	76,500	112,500
3. Housing	39.0%	36.0%	32.0%	30.0%	30.0%	29.0%
4. Food	15.0%	12.0%	13.0%	12.0%	11.0%	11.0%
5. Transportation	15.0%	12.0%	13.0%	14.0%	13.0%	13.0%
6. Insurance	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
7. Debts	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
8. Entertainment/Recreation	3.0%	5.0%	5.0%	7.0%	7.0%	8.0%
9. Clothing	4.0%	5.0%	5.0%	6.0%	7.0%	7.0%
10. Savings	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
11. Health & Wellness	5.0%	6.0%	6.0%	5.0%	5.0%	5.0%
12. Miscellaneous	4.0%	4.0%	6.0%	6.0%	7.0%	7.0%
13. Investments 3	0.0%	5.0%	5.0%	5.0%	5.0%	5.0%
Total Net Spendable Income:	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

If you have school/child care expenses, these percentages must be deducted from other categories.

14. School/Child Care 4	8.0%	6.0%	5.0%	5.0%	5.0%	5.0%

1 The most accurate way to determine your Federal, State and Other tax withholdings is to check your last Federal and State tax returns.

2 In some cases earned income credit (EIC) will apply. It may be possible to increase the number of deductions to lessen the amount of tax paid per month. Review the last tax return for specific information.

3 This category is used for long-term investment planning, such as college education or retirement.

4 This category is added as a guide only. If you have this expense, the percentage shown must be deducted from other budget categories.

Percentage Spending Plan [1]

Annual Income:

Gross Monthly Income:

	Use appropriate % from "Percentage Guide" tab [2]			
1. Tithe/Giving		x	$	-
2a. Taxes: Federal		x	$	-
2b. Taxes: Social Security		x	$	-
2c. Taxes: Medicare		x	$	-
2d. Taxes: State		x	$	-
2e. Taxes: Other		x	$	-
Total taxes:	0.00%			

Net Spendable Income (NSI)

Spending Category	Percentage		Net Spendable Income		
Net Spendable Income percentages below should add to 100%					
3. Housing		x	$	-	=
4. Food		x	$	-	=
5. Transportation		x	$	-	=
6. Insurance		x	$	-	=
7. Debts		x	$	-	=
8. Entertainment/Recreation		x	$	-	=
9. Clothing		x	$	-	=
10. Savings		x	$	-	=

11. Health & Wellness		x	$	-	=
12. Miscellaneous		x	$	-	=
13. Investments		x	$	-	=
14. School/Child Care[2]		x	$	-	=
Total: (cannot exceed 100%)	0.0%				

TOTAL: (cannot exceed Net Spendable Income)

1 **This form corresponds to Page 86 in the Do Well Life Group Manual.**

[2] **Use the guideline rates from the Percentage Guide tab, or use actual percentages from yo Federal and State tax returns.**

[3] **If you have school/child care expenses, these percentages must be deducted from other**

$ -

$ -

$ -		
$ -		
$ -		
$ -		
$ -		
$ -		
$ -		
	$ -	Annual NSI

Amount
$ -
$ -
$ -
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$ -
$ -
$ -
$ -
$ -

OK

our most recent

categories.

Advancing God's Principles of Stewardship and Life

Spending Plan Analysis [1]

Date:

Gross Income per year:

Gross Income per month:

Guideline Net Spendable Income Per Month:

Monthly Payment Category	Current Spending Plan [2]	Monthly Guideline Plan [3]
1. Tithe/Giving	$ -	$ -
2d. Taxes: Federal	$ -	$ -
2a. Taxes: Social Security	$ -	$ -
2b. Taxes: Medicare	$ -	$ -
2c. Taxes: State	$ -	$ -
2e. Taxes: Other	$ -	$ -
Taxes Total:	$ -	$ -
Net Spendable Income (NSI)	$ -	$ -
3. Housing	$ -	$ -
4. Food	$ -	$ -
5. Transportation	$ -	$ -
6. Insurance	$ -	$ -
7. Debts	$ -	$ -
8. Entertainment/Recreation	$ -	$ -
9. Clothing	$ -	$ -
10. Savings	$ -	$ -
11. Health & Wellness	$ -	$ -
12. Miscellaneous	$ -	$ -
13. Investments	$ -	$ -
14. School/Child Care	$ -	$ -
TOTAL of 3 to 14: (cannot exceed Net Spendable Income)	$ -	$ -

[1] This form corresponds to Page 87 in the Do Well Life Group Manual.

[2] **Amounts in the Current Spending Plan column are taken from the tab called "Est Spending**

[3] **When you complete the Percentage Spending Plan tab, it will automatically fill in the amou**

$ -	
$ -	
$ -	

Difference + or -	**New Monthly Plan**
$ -	
$ -	
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$ -	$ -
	$ -

ı Plan - Current."

nts for the Monthly Guideline Plan column.

Estimated Spending Plan - Balanced [1]

Monthly Income

GROSS MONTHLY INCOME	***Amount***	**$ -**
Monthly Salary		
Interest Income		
Dividends		
Commissions		
Bonuses/Tips		
Retirement Income		
Net Business Income		
Other Income		

LESS

Category 1 - Tithe/Giving (monthly)	***Amount***	**$ -**
The Local Church		
The Poor		
Other Ministries		
Other Giving		

Category 2 - Taxes (monthly)	***Amount***	**$ -**
Federal		
Social Security (FICA)		
Medicare		
State Taxes		
Local Taxes		
Other		

NET SPENDABLE INCOME (monthly)	***Amount***

Monthly Living Expenses

Category 3 - Housing (monthly)	***Amount***	**$ -**
Mortgage(s) *(from Debt List)*	$ -	
Rent		
Insurance		
Property Taxes		
Electricity		
Gas		
Water		
Sanitation		
Telephone / Cell phone		
Maintenance		
Cable TV / Internet Service		
Other		

Category 4 - Food (monthly)	***Amount***	**$ -**
Grocery		

Other		
Category 5 - Transportation (monthly)	***Amount***	***$ -***
Auto Payment(s) *(from Debt List)*	$ -	
Gas & Oil		
Auto Insurance		
Licenses & Taxes		
Maintenance		
Replacement		
Other - Tolls/Parking/Transit Fares		
Category 6 - Insurance (monthly)	***Amount***	***$ -***
Life		
Health/Dental		
Disability		
Other		
Category 7 - Debts (monthly)	***Amount***	***$ -***
$ -	$ -	
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	$ -	
Total Business/Investment Debt *(from Debt List)*	$ -	
Total Other (NOT on Debt List or extra payments on		
Category 8 - Entertainment & Recreation (monthly)	***Amount***	***$ -***
Eating Out / Lunches		
Baby Sitters		
Activities / Trips		
Vacation		
Pets		
Other		
Category 9 - Clothing (monthly)	***Amount***	***$ -***
Children's Clothing Needs		
Husband/Wife Clothing Needs		

Other		

Category 10 - Savings (monthly)	***Amount***	**$ -**
Savings Account		
Credit Union		
Other		

Category 11 - Health & Wellness (monthly)	***Amount***	**$ -**
Doctor		
Dentist		
Prescriptions		
Eye Glasses / Contacts		
Other		

Category 12 - Miscellaneous (monthly)	***Amount***	**$ -**
Toiletries / Cosmetics		
Beauty / Barber		
Laundry / Cleaning		
Allowances		
Subscriptions		
Gifts (including Christmas)		
Cash		
Other		

Category 13 - Investments (monthly)	***Amount***	**$ -**
401k/403b plans		
College Funds		
Stocks, Bonds, Mutual Funds		
Real Estate		
Other		

Category 14 - School/Child Care (monthly)	***Amount***	**$ -**
School Tuition		
School Books, Supplies, Materials, etc		
Transportation		
Day Care		
Tutoring, Lessons for Music, Dance, etc		
Other		

Total Living Expenses

INCOME vs. LIVING EXPENSES

Net Spendable Income

Less Total Living Expenses

Surplus or Deficit

$ -

$ -
$ -
$ -
$ -

Monthly Budget

Monthly Budget -				For Year :													
Category	INCOME	TITHE/ GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	ENTERTAINMENT RECREATION	CLOTHING	SAVINGS	HEALTH WELLNESS	MISC.	INVEST.	SCHOOL/ CHILDCARE	TOTAL EXPENSES	SURPLUS / DEFICIT
Month																	
Jan																$ -	$ -
Feb																$ -	$ -
Mar																$ -	$ -
Apr																$ -	$ -
May																$ -	$ -
Jun																$ -	$ -
Jul																$ -	$ -
Aug																$ -	$ -
Sep																$ -	$ -
Oct																$ -	$ -
Nov																$ -	$ -
Dec																$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date Budget																	
Jan	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Feb	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Mar	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Apr	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
May	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Jun	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Jul	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Aug	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Sep	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Oct	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Nov	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Dec	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

Monthly Budget

Actual Totals - No input on this page				For Year :	0												
Category	INCOME	TITHE/ GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	ENTERTAINMENT RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	SCHOOL/ CHILD CARE	TOTAL EXPENSES	SURPLUS DEFICIT
Month																	
Jan	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Feb	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Mar	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Apr	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
May	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Jun	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Jul	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
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Year to Date Actual vs. Spending Plan																	
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Income Allocation

BUDGET CATEGORY	Monthly Allocation	Pay Period #1*	Pay Period #2	Pay Period #3	Pay Period #4	Pay Period #5**	Other Income***	Total
Income (His)								
Income (Hers)								
Tithe								0.00
Tax (Est. - Incl. Fed., State, FICA)								0.00
TOTAL NET SPENDABLE		0.00	0.00	0.00	0.00	0.00	0.00	
Housing	0.00							
Mortgage (rent)								0.00
Insurance								0.00
Taxes								0.00
Electricity								0.00
Gas								0.00
Water								0.00
Sanitation								0.00
Telephone								0.00
Maintenance								0.00
Cable/Internet								0.00
Other								0.00
Other								0.00
Food								0.00
Automobiles	0.00							
Payments (Car #1)****								0.00
Payments (Car #2)****								0.00
Gas & Oil								0.00
Insurance								0.00
License / Taxes								0.00
Maint. / Repair / Replace								0.00
Insurance	0.00							
Life								0.00
Medical								0.00
Other								0.00
Debts	0.00							
Credit Card								0.00
Loans & Notes								0.00
Other								0.00
Enter. & Recreation	0.00							
Eating Out								0.00
Baby Sitters								0.00
Activities / Trips								0.00
Vacation								0.00
Pets								0.00
Clothing								0.00
Savings								0.00
Medical Expenses	0.00							
Doctor								0.00
Dentist								0.00
Prescriptions								0.00
Other								0.00
Miscellaneous	0.00							
Toiletry, cosmetics								0.00
Beauty, barber								0.00
Laundry, cleaning								0.00
Allowances / lunches								0.00
Subscriptions								0.00
Gifts (incl. Christmas)								0.00
Cash								0.00
Cell Phone								0.00
Other								0.00
School / Child Care	0.00							
Tuition								0.00
Materials								0.00
Transportation								0.00
Day Care								0.00
Investments								0.00
TOTAL BUDGETED	0.00							0.00
UNALLOCATED SURPLUS INCOME								0.00

* If you are paid twice a month, you will only need 2 Pay Period columns.
If you are paid every two weeks, you will need 2 Pay Period columns most months, but 2 times a year, you will have an "extra" paycheck. Use th

** If you are paid weekly, you will need 4 Pay Period columns most months, but 4 times a year, you will have an "extra" paycheck. Use the Pay P

*** Use this for other income you may have: bonuses, income tax refunds, side jobs, etc.

**** If you don't have a first or second car payment, use this for a car replacement fund.

This worksheet is for planning spending by percentage for any "surplus" income, such as "extra" paychecks, income tax refunds, gifts, inheritances, bonuses, etc. It is recommended that you start with a full tithe. You might want to use a *small* portion for a bit of a splurge. Examine other needs and goals - categories that need supplementing (such as your emergency fund), debt reduction acceleration, etc. Be sure, if you are married, that you and your spouse plan together and are in agreement. Pre-planning for surplus income will help to insure that these funds are used wisely. Make this a prayerful process.

Income		
Tithe		$0
Tax		
Total Net		**$0**
Category	**%**	**Amount**
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00
		$0.00

Category Page

(Individual Account Page)

Spending Category:

Date	Transaction	Deposit	Withdrawal	Balance
		$ -	$ -	$ -
		$ -	$ -	$ -
		$ -	$ -	$ -
		$ -	$ -	$ -
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Life Insurance Worksheet

GROSS MONTHLY INCOME			
Present Annual Income Needs:			
Subtract deceased person's needs:			
Subtract other income available: (Social Security, Investments, Retirement)			
= Net annual income needed:	$ -		
Net annual income needed, multiplied by 12.5 (assumes an 8% after-tax investment return on insurance proceeds		$ -	
Lump sum needs:			
Debts:			
Education:			
Other:			
Total lump sum needs:		$ -	
Total Life Insurance Needs:			$ -

Priority Number	Idea	Decrease Expenses	Increase Income	Raise Cash (sell things)

Monthly Budget

Month	January	Year	0														This Month
Category	INCOME	TITHE/ GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	ENTERTAINMENT RECREATION	CLOTHING	SAVINGS	HEALTH & WELLNESS	MISC.	INVEST.	SCHOOL/ CHILD CARE	TOTAL EXPENSES	SURPLUS / DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
1																$ -	$ -
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This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
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This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
			This Month				Previous Month / Year to Date				Year to Date						
BUDGET	CROWN Do Well	Total Income		$ -		Total Income		$ -		Total Income		$ -					
SUMMARY		Minus Total Expenses		$ -	+	Minus Total Expenses		$ -	=	Minus Total Expenses		$ -					
		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -					

Monthly Budget

Month	February	Year	0														This Month
Category	INCOME	TITHE/ GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	ENTERTAINMENT RECREATION	CLOTHING	SAVINGS	HEALTH & WELLNESS	MISC.	INVEST.	SCHOOL/ CHILD CARE	TOTAL EXPENSES	SURPLUS / DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
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This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
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This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

	This Month			Previous Month / Year to Date			Year to Date	
BUDGET SUMMARY	Total Income	$ -		Total Income	$ -		Total Income	$ -
	Minus Total Expenses	$ -	+	Minus Total Expenses	$ -	=	Minus Total Expenses	$ -
	Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -

Monthly Budget

Month	March	Year	0														This Month
Category	INCOME	TITHE/ GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	ENTERTAINMENT RECREATION	CLOTHING	SAVINGS	HEALTH & WELLNESS	MISC.	INVEST.	SCHOOL/ CHILD CARE	TOTAL EXPENSES	SURPLUS / DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
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This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
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This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

	This Month			Previous Month / Year to Date			Year to Date	
BUDGET SUMMARY	Total Income	$ -		Total Income	$ -		Total Income	$ -
	Minus Total Expenses	$ -	+	Minus Total Expenses	$ -	=	Minus Total Expenses	$ -
	Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -

Monthly Budget

Month	April	Year	0														This Month
		TITHE/							ENTERTAINMENT			HEALTH &			SCHOOL/	TOTAL	SURPLUS /
Category	INCOME	GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	CHILD CARE	EXPENSES	DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
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This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
16																$ -	$ -
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31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

	This Month			Previous Month / Year to Date			Year to Date	
BUDGET	Total Income	$ -		Total Income	$ -		Total Income	$ -
SUMMARY	Minus Total Expenses	$ -	+	Minus Total Expenses	$ -	=	Minus Total Expenses	$ -
	Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -

Monthly Budget

Month	May	Year	0														This Month
		TITHE/							ENTERTAINMENT			HEALTH &			SCHOOL/	TOTAL	SURPLUS /
Category	INCOME	GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	CHILD CARE	EXPENSES	DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
1																$ -	$ -
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14																$ -	$ -
15																$ -	$ -
This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
16																$ -	$ -
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28																$ -	$ -
29																$ -	$ -
30																$ -	$ -
31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

		This Month				Previous Month / Year to Date				Year to Date	
BUDGET		Total Income		$ -		Total Income		$ -		Total Income	$ -
SUMMARY	CROWN Do Well	Minus Total Expenses		$ -	+	Minus Total Expenses		$ -	=	Minus Total Expenses	$ -
		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit	$ -

Monthly Budget

Month	June	Year	0														This Month
		TITHE/							ENTERTAINMENT			HEALTH &			SCHOOL/	TOTAL	SURPLUS /
Category	INCOME	GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	CHILD CARE	EXPENSES	DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
1																$ -	$ -
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14																$ -	$ -
15																$ -	$ -
This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
16																$ -	$ -
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28																$ -	$ -
29																$ -	$ -
30																$ -	$ -
31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

			This Month			Previous Month / Year to Date					Year to Date	
BUDGET		Total Income		$ -		Total Income		$ -		Total Income		$ -
SUMMARY		Minus Total Expenses		$ -	+	Minus Total Expenses		$ -	=	Minus Total Expenses		$ -
		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -

Monthly Budget

Month	July	Year	0														This Month
		TITHE/							ENTERTAINMENT			HEALTH &			SCHOOL/	TOTAL	SURPLUS /
Category	INCOME	GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	CHILD CARE	EXPENSES	DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
1																$ -	$ -
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14																$ -	$ -
15																$ -	$ -
This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
16																$ -	$ -
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30																$ -	$ -
31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

		This Month			Previous Month / Year to Date			Year to Date	
BUDGET	CROWN Do Well	Total Income	$ -		Total Income	$ -		Total Income	$ -
SUMMARY		Minus Total Expenses	$ -	+	Minus Total Expenses	$ -	=	Minus Total Expenses	$ -
		Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -

Monthly Budget

Month	August	Year	0														This Month
		TITHE/							ENTERTAINMENT			HEALTH &			SCHOOL/	TOTAL	SURPLUS /
Category	INCOME	GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	CHILD CARE	EXPENSES	DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
1																$ -	$ -
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14																$ -	$ -
15																$ -	$ -
This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
16																$ -	$ -
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30																$ -	$ -
31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

		This Month				Previous Month / Year to Date				Year to Date		
BUDGET SUMMARY	CROWN Do Well	Total Income		$ -		Total Income		$ -		Total Income		$ -
		Minus Total Expenses		$ -	+	Minus Total Expenses		$ -	=	Minus Total Expenses		$ -
		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -

Monthly Budget

Month	September	Year	0													This Month
Category	INCOME	TITHE/ GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	ENTERTAINMENT RECREATION	CLOTHING	SAVINGS	HEALTH & WELLNESS	MISC.	INVEST.	SCHOOL/ CHILD CARE	TOTAL EXPENSES	SURPLUS / DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
1																$ -	$ -
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14																$ -	$ -
15																$ -	$ -
This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
16																$ -	$ -
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30																$ -	$ -
31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

	This Month			Previous Month / Year to Date			Year to Date	
BUDGET SUMMARY	Total Income	$ -		Total Income	$ -		Total Income	$ -
	Minus Total Expenses	$ -	+	Minus Total Expenses	$ -	=	Minus Total Expenses	$ -
	Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -

Monthly Budget

Month	October	Year	0													This Month
		TITHE/							ENTERTAINMENT			HEALTH &			SCHOOL/	TOTAL	SURPLUS /
Category	INCOME	GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	CHILD CARE	EXPENSES	DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
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15																$ -	$ -
This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
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31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

			This Month			Previous Month / Year to Date					Year to Date	
BUDGET	CROWN Do Well	Total Income		$ -		Total Income		$ -		Total Income		$ -
SUMMARY		Minus Total Expenses		$ -	+	Minus Total Expenses		$ -	=	Minus Total Expenses		$ -
		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -

Monthly Budget

Month	November	Year	0														This Month
		TITHE/							ENTERTAINMENT			HEALTH &			SCHOOL/	TOTAL	SURPLUS /
Category	INCOME	GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	CHILD CARE	EXPENSES	DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
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This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
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31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

		This Month				Previous Month / Year to Date				Year to Date		
BUDGET SUMMARY	CROWN Do Well	Total Income		$ -		Total Income		$ -		Total Income		$ -
		Minus Total Expenses		$ -	+	Minus Total Expenses		$ -	=	Minus Total Expenses		$ -
		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -		Equals Surplus / Deficit		$ -

Monthly Budget

Month	December	Year	0														This Month
		TITHE/							ENTERTAINMENT			HEALTH &			SCHOOL/	TOTAL	SURPLUS /
Category	INCOME	GIVING	TAXES	HOUSING	FOOD	TRANSPOR.	INSUR.	DEBTS	RECREATION	CLOTHING	SAVINGS	WELLNESS	MISC.	INVEST.	CHILD CARE	EXPENSES	DEFICIT
BUDGETED AMOUNT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Date																	
1																$ -	$ -
2																$ -	$ -
3																$ -	$ -
4																$ -	$ -
5																$ -	$ -
6																$ -	$ -
7																$ -	$ -
8																$ -	$ -
9																$ -	$ -
10																$ -	$ -
11																$ -	$ -
12																$ -	$ -
13																$ -	$ -
14																$ -	$ -
15																$ -	$ -
This month SUBTOTAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
16																$ -	$ -
17																$ -	$ -
18																$ -	$ -
19																$ -	$ -
20																$ -	$ -
21																$ -	$ -
22																$ -	$ -
23																$ -	$ -
24																$ -	$ -
25																$ -	$ -
26																$ -	$ -
27																$ -	$ -
28																$ -	$ -
29																$ -	$ -
30																$ -	$ -
31																$ -	$ -
This month Actual	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
This month vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date BUDGET	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Year to Date ACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
YTD Actual vs. Budget	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

	This Month			Previous Month / Year to Date			Year to Date	
BUDGET SUMMARY	Total Income	$ -		Total Income	$ -		Total Income	$ -
	Minus Total Expenses	$ -	+	Minus Total Expenses	$ -	=	Minus Total Expenses	$ -
	Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -		Equals Surplus / Deficit	$ -