



Budget Practical Financial Workbook

Instructions:

1. Save this file to your computer under the file name that makes sense for you, such as "My Budget /
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 or tax rates, please save your file, then "unprotect" the appropriate sheet(s) by using the password

4	TABLE OF CONTENTS	
	30 Day Tracker	Begin tracking your spending, daily, so you are knowing where you
	Variable Expenses	Use this to obtain a reasonable monthly budget figure for irregular
	Current Spending Plan	Complete this to give a picture of your current spending.
	Percentage Guidelines	Find the closest scenario to your situation and use the appropriate
	Percentage Spending Plan	Use the Percentage Guidelines to get specific figures that fit your
	Spending Plan Analysis	Compare your current spending to the guideline budget amounts,
	Balanced Spending Plan	Transfer your adjusted balanced budget figures here.

Analysis Forms".XLS.

ments to any formulas
"2015" (without quotes).

ur money is going.
or non-monthly expenses.
percentage guideline for your Percentage Spending Plan figures.
situation.
and begin making adjustments until you have a balanced budget.

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			\$ -

Current Spending Plan

Monthly Income

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

LESS

Category 1 - Tithing/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)			
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 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.



CROWN™

Advancing God's Principles of Stewardship and Life

Percentage Spending Plan ¹

Annual Income:

Gross Monthly Income:

Use appropriate % from "Percentage Guide" tab ²

1. Tithe/Giving	<input type="text"/>	X	\$	-
2a. Taxes: Federal	<input type="text"/>	X	\$	-
2b. Taxes: Social Security	<input type="text"/>	X	\$	-
2c. Taxes: Medicare	<input type="text"/>	X	\$	-
2d. Taxes: State	<input type="text"/>	X	\$	-
2e. Taxes: Other	<input type="text"/>	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	<input type="text"/>	X	\$	-	=
4. Food	<input type="text"/>	X	\$	-	=
5. Transportation	<input type="text"/>	X	\$	-	=
6. Insurance	<input type="text"/>	X	\$	-	=
7. Debts	<input type="text"/>	X	\$	-	=
8. Entertainment/Recreation	<input type="text"/>	X	\$	-	=
9. Clothing	<input type="text"/>	X	\$	-	=
10. Savings	<input type="text"/>	X	\$	-	=

11. Health & Wellness	<input type="text"/>	x	\$	-	=
12. Miscellaneous	<input type="text"/>	x	\$	-	=
13. Investments	<input type="text"/>	x	\$	-	=
14. School/Child Care²	<input type="text"/>	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 your Federal and State tax returns.

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



\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ - Annual NSI

Amount

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ -

\$ - OK

our most recent

categories.



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

| Plan - Current."

nts for the Monthly Guideline Plan column.

Balanced Spending Plan 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 - Tithing/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)			
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 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	

\$ -

\$.
----	---

--	--

\$.
----	---

\$.
----	---

\$.
----	---

--	--