

Assets & Liabilities	
Date:	

ASSETS (Present Market Value)	Balance
Cash On Hand (both husband and wife if married)	
Checking Accounts	
Savings Accounts	
HSA / FSA Accounts	
Stocks and Bonds	
Cash Value of Life Insurance	
Primary Home Value (look up value, e.g., zillow.com)	
Other Real Estate	
Automobile 1 (look up value, e.g., kbb.com)	
Automobile 2 (look up value, e.g., kbb.com)	
Automobile 3 (look up value, e.g., kbb.com)	
Retirement Savings (401k, 403b, IRAs, Pension, etc.)	
College Savings	
Other Assets	
Total Assets	

LIABILITIES / DEBT LIST					
CREDIT CARDS (only list cards for which you do not pay the full statement balance each month)					
Credit Card Issuer	What Was Purchased	Minimum Monthly Payment	Interest Rate	Months Past Due	Balance Due
Total Credit Cards					

AUTO LOANS					
Loan Company	Year, Make, Model	Minimum Monthly Payment	Interest Rate	Months Past Due	Balance Due
Total Auto Loans					

HOME MORTGAGES (includes home equity loans or lines of credit)					
Mortgage Service Company	Property Address	Minimum Monthly Payment	Interest Rate	Months Past Due	Balance Due
Total Home Mortgages					

OTHER DEBT (education, medical, personal, business, legal, IRS, etc.)					
Who	Type of Debt (medical, education, etc.)	Minimum Monthly Payment	Interest Rate	Months Past Due	Balance Due
Total Other Debt					

Total Liabilities/Debts	
NET WORTH (Total Assets minus Total Liabilities/Debts)	

30-Day Tracker (Categories 1-7)

Month, Year		GROSS INCOME	TITHE & GIVING	TAXES	HOUSING	FOOD	TRANSPORT	INSURANCE	DEBTS
Day									
	1								
	2								
	3								
	4								
	5								
	6								
	7								
	8								
	9								
	10								
	11								
	12								
	13								
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	20								
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	22								
	23								
	24								
	25								
	26								
	27								
	28								
	29								
	30								
	31								
Totals									

30-Day Tracker (Categories 8-14)

Month, Year		ENTERTAIN & RECREATION	CLOTHING	SAVINGS	HEALTH & WELLNESS	MISC.	INVEST.	SCHOOL CHILD CARE
Day								
1								
2								
3								
4								
5								
6								
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27								
28								
29								
30								
31								
Totals								

MONTHLY SPENDING PLAN	Current	Guideline⁽¹⁾	New Budget
Monthly Income			
Gross Monthly Income			
Monthly Salary and Pensions			
Interest, Dividends			
Commissions, Bonuses, Tips			
Net Business and Rentals Income			
Other Income			
LESS			
Category 1 - Tithe/Giving			
Our Local Church			
Other Ministries and Giving			
Category 2 - Taxes			
Taxes (Fed, State, Medicare, Social Security)			
<i>Do not include medical/dental premiums, retirement plans, HSA/FSA contributions, charity contributions that are deducted from paychecks. Include these deductions as expenses in rows listed below.</i>			
NET SPENDABLE INCOME			
Monthly Expenses			
Category 3 - Housing			
Total Mortgage Payments (from Debt List)			
Extra Mortgage Payments			
Rent			
Homeowner's or Renter's Insurance			
Property Taxes			
Utilities (Electricity, Gas, Water, Trash)			
Telephone / Cell phone			
Home Maintenance and Repair			
Internet / Cable Service			
Other			
Category 4 - Food			
Grocery			
Other			

MONTHLY SPENDING PLAN	Current	Guideline⁽¹⁾	New Budget
Monthly Expenses			
Category 5 - Transportation			
Total Auto Payments (from Debt List)			
Extra Auto Payment			
Gas			
Auto Insurance			
Registration & Taxes			
Maintenance			
Replacement			
Other - Tolls/Parking/Transit Fares			
Category 6 - Insurance			
Life Insurance			
Medical, Dental Insurance			
Disability Insurance			
Other			
Category 7 - Debts			
Total Credit Cards (from Debt List)			
Total Other Debt (from Debt List)			
Extra Debt Payments			
Category 8 - Entertainment & Recreation			
Eating Out / Lunches			
Baby Sitters			
Activities / Trips			
Vacation			
Pets			
Hobbies			
Other			
Category 9 - Clothing			
Adult Clothing Needs			
Children's Clothing Needs			
Other			
Category 10 - Savings			
Emergency Fund			
Other Savings Goals			

MONTHLY SPENDING PLAN	Current	Guideline⁽¹⁾	New Budget
Monthly Expenses			
Category 11 - Health & Wellness			
Doctor and Dentist Out of Pocket			
Prescriptions			
Eye Exams, Glasses and Contacts			
HSA or FSA Contributions			
Other			
Category 12 - Miscellaneous			
Toiletries / Cosmetics			
Beauty / Barber			
Laundry / Cleaning			
Allowances			
Subscriptions			
Gifts (including Christmas)			
Other			
Category 13 - Investments			
Employer 401k/403b plans and IRAs			
College Funds			
Non-Retirement Stocks, Bonds, Mutual Funds			
Other			
Category 14 - School/Child Care ⁽²⁾			
School Tuition and Transportation			
School Books, Supplies, Materials, etc			
Day Care			
Tutoring, Lessons, Sports			
Other			
Total Expenses			
INCOME vs. EXPENSE SUMMARY			
Net Spendable Income			
Less Total Expenses			
Surplus or Deficit			
<p>(1) To get the Guideline, use the Percentage Guides and Guideline Spending Plan forms</p> <p>(2) This category does not have a guideline amount.</p>			

PERCENTAGE GUIDES

Instructions:

1. Find the family situation that most closely represents your family (i.e. Married with 4 children, Single with roommate, etc.).
2. Find the gross income level that most closely represents your family (i.e. \$25,000 to \$125,000).
3. Copy percentages for each category to the Guideline Spending Plan form.

Suggested Percentage Guidelines For Family Income

(Married with 4 Children)

GROSS HOUSEHOLD INCOME:	25.000	35.000	45.000	55.000	85.000	125.000
1. Tithe/Giving	10%	10%	10%	10%	10%	10%
2. Total Taxes	no guideline percentages - use current withholding					
Apply the following percentages to Net Spendable Income (Gross Income minus Tithe and Taxes)						
3. Housing	38%	38%	34%	33%	32%	32%
4. Food	15%	15%	14%	14%	14%	14%
5. Transportation	14%	14%	12%	12%	11%	11%
6. Insurance	5%	5%	5%	5%	5%	5%
7. Debts	5%	5%	5%	5%	5%	5%
8. Entertainment/Recreation	3%	4%	4%	5%	5%	5%
9. Clothing	5%	5%	6%	6%	7%	7%
10. Savings	4%	4%	5%	5%	5%	5%
11. Health & Wellness	8%	7%	7%	7%	7%	7%
12. Miscellaneous	3%	3%	5%	5%	5%	5%
13. Investments	0%	0%	3%	3%	4%	4%
Totals:	100%	100%	100%	100%	100%	100%
14. School/Child Care	no guideline percentages					

PERCENTAGE GUIDES

Instructions:

1. Find the family situation that most closely represents your family (i.e. Married with 4 children, Single with roommate, etc.).
2. Find the gross income level that most closely represents your family (i.e. \$25,000 to \$125,000).
3. Copy percentages for each category to the Guideline Spending Plan form.

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%	10%	10%	10%	10%	10%
2. Total Taxes	Use Current Monthly Taxes					
Apply the following percentages to Net Spendable Income (Gross Income minus Tithe and Taxes)						
3. Housing	39%	36%	32%	30%	30%	29%
4. Food	15%	12%	13%	12%	11%	11%
5. Transportation	15%	12%	13%	14%	13%	13%
6. Insurance	5%	5%	5%	5%	5%	5%
7. Debts	5%	5%	5%	5%	5%	5%
8. Entertainment/Recreation	3%	5%	5%	7%	7%	8%
9. Clothing	4%	5%	5%	6%	7%	7%
10. Savings	5%	5%	5%	5%	5%	5%
11. Health & Wellness	5%	6%	6%	5%	5%	5%
12. Miscellaneous	4%	4%	6%	6%	7%	7%
13. Investments	0%	5%	5%	5%	5%	5%
Totals:	100%	100%	100%	100%	100%	100%
14. School/Child Care	no guideline percentages					

PERCENTAGE GUIDES

Instructions:

1. Find the family situation that most closely represents your family (i.e. Married with 4 children, Single with roommate, etc.).
2. Find the gross income level that most closely represents your family (i.e. \$25,000 to \$125,000).
3. Copy percentages for each category to the Guideline Spending Plan form.

Suggested Percentage Guidelines For Family Income

(Married with No Children)

GROSS HOUSEHOLD INCOME:	25.000	35.000	45.000	55.000	85.000	125.000
1. Tithe/Giving	10%	10%	10%	10%	10%	10%
2. Total Taxes	Use Current Monthly Taxes					
Apply the following percentages to Net Spendable Income (Gross Income minus Tithe and Taxes)						
3. Housing	40%	36%	34%	32%	31%	30%
4. Food	15%	14%	13%	12%	11%	11%
5. Transportation	15%	14%	14%	13%	13%	13%
6. Insurance	5%	5%	5%	5%	5%	5%
7. Debts	5%	5%	5%	5%	5%	5%
8. Entertainment/Recreation	3%	4%	4%	5%	7%	7%
9. Clothing	4%	4%	5%	6%	6%	7%
10. Savings	4%	4%	4%	5%	5%	5%
11. Health & Wellness	6%	6%	6%	6%	5%	5%
12. Miscellaneous	3%	4%	5%	6%	7%	7%
13. Investments	0%	4%	5%	5%	5%	5%
Totals:	100%	100%	100%	100%	100%	100%
14. School/Child Care	no guideline percentages					

PERCENTAGE GUIDES

Instructions:

1. Find the family situation that most closely represents your family (i.e. Married with 4 children, Single with roommate, etc.).
2. Find the gross income level that most closely represents your family (i.e. \$25,000 to \$125,000).
3. Copy percentages for each category to the Guideline Spending Plan form.

Suggested Percentage Guidelines For Individual Income

(Single with 1 Child)

Suggested Percentage Guidelines For Individual Income						
(Single with 1 Child)						
GROSS HOUSEHOLD INCOME:	25.000	35.000	45.000	55.000	85.000	125.000
1. Tithe/Giving	10%	10%	10%	10%	10%	10%
2. Total Taxes	Use Current Monthly Taxes					
Apply the following percentages to Net Spendable Income (Gross Income minus Tithe and Taxes)						
3. Housing	40%	39%	39%	36%	34%	30%
4. Food	15%	14%	14%	13%	13%	12%
5. Transportation	15%	14%	14%	13%	13%	12%
6. Insurance	3%	3%	4%	4%	5%	5%
7. Debts	5%	5%	5%	5%	5%	5%
8. Entertainment/Recreation	3%	4%	4%	6%	6%	6%
9. Clothing	5%	5%	5%	6%	7%	7%
10. Savings	5%	5%	5%	5%	5%	5%
11. Health & Wellness	6%	7%	6%	6%	6%	6%
12. Miscellaneous	3%	4%	4%	6%	6%	6%
13. Investments	0%	0%	0%	0%	0%	6%
Totals:	100%	100%	100%	100%	100%	100%
14. School/Child Care	no guideline percentages					

PERCENTAGE GUIDES

Instructions:

1. Find the family situation that most closely represents your family (i.e. Married with 4 children, Single with roommate, etc.).
2. Find the gross income level that most closely represents your family (i.e. \$25,000 to \$125,000).
3. Copy percentages for each category to the Guideline Spending Plan form.

Suggested Percentage Guidelines For Individual Income

(Single with No Children / Living Alone)

GROSS HOUSEHOLD INCOME:	25.000	35.000	45.000	55.000	85.000	125.000
1. Tithe/Giving	10%	10%	10%	10%	10%	10%
2. Total Taxes	Use Current Monthly Taxes					
Apply the following percentages to Net Spendable Income (Gross Income minus Tithe and Taxes)						
3. Housing	40%	38%	36%	34%	32%	30%
4. Food	6%	6%	7%	7%	7%	7%
5. Transportation	15%	15%	14%	14%	13%	13%
6. Insurance	4%	4%	4%	5%	5%	5%
7. Debts	5%	5%	5%	5%	5%	5%
8. Entertainment/Recreation	6%	6%	7%	7%	8%	9%
9. Clothing	5%	6%	6%	7%	8%	8%
10. Savings	5%	5%	5%	5%	5%	5%
11. Health & Wellness	6%	5%	5%	5%	4%	4%
12. Miscellaneous	5%	6%	6%	6%	7%	7%
13. Investments	3%	4%	5%	5%	6%	7%
Totals:	100%	100%	100%	100%	100%	100%
14. School/Child Care	no guideline percentages					

PERCENTAGE GUIDES

Instructions:

1. Find the family situation that most closely represents your family (i.e. Married with 4 children, Single with roommate, etc.).
2. Find the gross income level that most closely represents your family (i.e. \$25,000 to \$125,000).
3. Copy percentages for each category to the Guideline Spending Plan form.

Suggested Percentage Guidelines For Individual Income

(Single with No Children / Living with Roommate)

GROSS HOUSEHOLD INCOME:	25.000	35.000	45.000	55.000	85.000	125.000
1. Tithe/Giving	10%	10%	10%	10%	10%	10%
2. Total Taxes	Use Current Monthly Taxes					
Apply the following percentages to Net Spendable Income (Gross Income minus Tithe and Taxes)						
3. Housing	25%	24%	23%	22%	21%	20%
4. Food	6%	6%	6%	7%	7%	7%
5. Transportation	20%	19%	18%	16%	15%	13%
6. Insurance	4%	4%	4%	5%	5%	5%
7. Debts	5%	5%	5%	5%	5%	5%
8. Entertainment/Recreation	9%	9%	9%	9%	10%	10%
9. Clothing	7%	7%	7%	7%	7%	8%
10. Savings	8%	8%	9%	10%	10%	10%
11. Health & Wellness	6%	6%	6%	5%	5%	5%
12. Miscellaneous	5%	6%	6%	7%	7%	7%
13. Investments	5%	6%	7%	7%	8%	10%
Totals:	100%	100%	100%	100%	100%	100%
14. School/Child Care	no guideline percentages					

GUIDELINE SPENDING PLAN

Gross Monthly Income:					
	Percentage from Guide	x	Gross Monthly Income	=	Guideline Amount
1. Tithe/Giving	10%	x		=	
2. Total Taxes	no guideline		current withholding:		
Net Spendable Income (Gross Income minus Title and Taxes):					

Expense Category	Percentage from Guide	x	Net Spendable Income	=	Guideline Amount
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	no guideline		<i>Copy the above amounts to the "Guideline" column of the Monthly Spending Plan form</i>		
Total Percentages: (cannot exceed 100%)					
Total Guideline Expenses: (cannot exceed Net Spendable Income)					

Monthly Budget Tracker (Categories 1-7)

Month, Year	GROSS INCOME	TITHE & GIVING	TAXES	HOUSING	FOOD	TRANSPORT	INSURANCE	DEBTS
Budget:								
Day								
1								
2								
3								
4								
5								
6								
7								
8								
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25								
26								
27								
28								
29								
30								
31								
Total Actual								
Actual vs. Budget								
Year to Date Budget								
Year to Date Actual								
YTD Actual vs. Budget								

Monthly Budget Tracker (Categories 8-14)								
Month, Year		ENTERTAIN & RECREATION	CLOTHING	SAVINGS	HEALTH & WELLNESS	MISC.	INVEST.	SCHOOL/ CHILD CARE
Budget:								
Day								
1								
2								
3								
4								
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27								
28								
29								
30								
31								
Total Actual								
Actual vs. Budget								
Year to Date Budget								
Year to Date Actual								
YTD Actual vs. Budget								