

Budget Recap

Name: _____

Item	Budget	Month 1	Month 2	Month 3	Month 4	Month 5	Totals	Average
Tithes/Offerings								
Mortgage/Rent							0.00	
Utilities*							0.00	
Insurance							0.00	
Property Taxes							0.00	
Groceries							0.00	
Home Goods							0.00	
Car Payment(s)							0.00	
Gas							0.00	
Car Maintenance							0.00	
Car Insurance							0.00	
Life Insurance							0.00	
Health Insurance							0.00	
Medical/Doctor							0.00	
Dentist							0.00	
Drugs							0.00	
Clothes							0.00	
School/Child Care							0.00	
Entertainment**							0.00	
Miscellaneous							0.00	
Debt Freedom							0.00	
Totals								

*Utilities - Gas/Electric, Water/Sewer, Internet, Phones, Garbage

**Entertainment - Restaurant, Games, Babysitting, Events, etc.

Debts

Car Loan(s)	
Credit Card Balance	
Student Loan(s)	
Other	

Monthly Income (Average)

Income 1	
Income 2	
Income 3	

Savings/Assesets

1	
2	
3	