

Expenses	Monthly	Yearly
HOME		
Mortgage/rent		
Home/Rental Insurance		
Electricity		
Gas/Oil		
Water/Sewer/Trash		
Phone		
Cable/Satellite		
Internet		
Furnishing/Appliances		
Lawn/Garden		
Maintenance/Improvements		
Other		
Total Home		
TRANSPORTATION		
Car payments		
Auto Insurance		
Gas		
Public Transportation		
Repairs/Maintenance		
Tags/Taxes		
Total Transportation		

DAILY LIVING		
Groceries		
Child care		
Clothing		
Cleaning		
Education		
Charitable Contributions		
Child support/Alimony		
Gifts to Family		
ATM withdrawals		
Professional Fees		
Total Daily Living		
ENTERTAINMENT		
Vacations		
Events/Concerts/Sports		
Restaurants/ Dinner		
Club memberships		
Total Entertainment		
HEALTH		
Health/Dental Insurance		
Gym membership		
Doctors/Dentist visits		
Medicine/Prescriptions		
Veterinarian		
Life Insurance		
Total Health		
OTHER		
Other expenses		
TOTAL		

Upcoming Major Purchases

	Description	Amount	Expected Date
1			
2			
3			
4			
5			
	Total		