

# SIMPLIFIED

## Monthly Budget Sheet

### 1. REMOVED FROM CHECK

Health insurance \_\_\_\_\_

Dental insurance \_\_\_\_\_

Retirement \_\_\_\_\_

\_\_\_\_\_

**TOTAL FROM CHECK** \_\_\_\_\_

### 2. MANUAL PAYMENTS

Tithes \_\_\_\_\_

Mortgage \_\_\_\_\_

Daycare \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 3. AUTOMATIC PAYMENTS

Electric \_\_\_\_\_

Water / Sewer \_\_\_\_\_

Car insurance \_\_\_\_\_

Phone / Cellular \_\_\_\_\_

Cable \_\_\_\_\_

Internet \_\_\_\_\_

Security system \_\_\_\_\_

Student loans \_\_\_\_\_

Credit card \_\_\_\_\_

Car payment \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 4. CASH

Groceries \_\_\_\_\_

Gas \_\_\_\_\_

Prescriptions \_\_\_\_\_

Recreation \_\_\_\_\_

Clothing \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### TOTAL

Sum of boxes 2,3,4 \_\_\_\_\_

Sum total ÷ 2 \_\_\_\_\_

Bi-weekly payment \_\_\_\_\_

Bi-weekly cash removal \_\_\_\_\_

Money left-over \_\_\_\_\_