







# Spending Plan

1.	Income	Target % _____	Actual % <input type="text"/>
	Income #1	\$ _____	Monthly gross - before taxes
	Income #2	\$ _____	Monthly gross - before taxes
	Other	\$ _____	Rental, investment
2.	Giving	Target % _____	Actual % <input type="text"/>
	Church	\$ _____	
	Other	\$ _____	
3.	Saving	Target % _____	Actual % <input type="text"/>
	Emergency	\$ _____	
	Retirement	\$ _____	401-K, 403b, IRA
	College	\$ _____	
4.	Taxes	Target % _____	Actual % <input type="text"/>
	Federal	\$ _____	Use actual amount from pay stub
	State	\$ _____	Use actual amount from pay stub
	Social Security	\$ _____	Use actual amount from pay stub
	Medicare	\$ _____	Use actual amount from pay stub
5.	Debt	Target % _____	Actual % <input type="text"/>
	IRS	\$ _____	
	Credit Card #1	\$ _____	3% of balance paid monthly (CCCS)
	Credit Card #2	\$ _____	Minimum monthly payment
	Credit Card #3	\$ _____	Minimum monthly payment
	Credit Card #4	\$ _____	Minimum monthly payment
	Credit Card #5	\$ _____	Minimum monthly payment
	Car #1	\$ _____	Minimum monthly payment
	Car #2	\$ _____	Minimum monthly payment
	Student Loans	\$ _____	Minimum monthly payment
	Other	\$ _____	Minimum monthly payment
6.	Housing	Target % _____	Actual % <input type="text"/>
	Mortgage/Rent	\$ _____	
	Home Insurance	\$ _____	May be part of home mortgage
	Property Taxes	\$ _____	May be part of home mortgage
	Maintenance	\$ _____	
	Electricity	\$ _____	Average for 12 months
	Gas	\$ _____	Average for 12 months



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	Water	\$ _____	Average for 12 months
	Trash	\$ _____	
	Phone	\$ _____	
	Association Dues	\$ _____	Average for 12 months.
7.	Transportation	Target % _____	Actual % 
	Auto Insurance	\$ _____	Average for 12 months
	Registration/License	\$ _____	Average for 12 months
	Gasoline	\$ _____	
	Toll & Parking	\$ _____	
	Oil & Maintenance	\$ _____	
	Other	\$ _____	
8.	Insurance	Target % _____	Actual % 
	Health	\$ _____	
	Dental	\$ _____	
	Life	\$ _____	
	Disability	\$ _____	
	Other	\$ _____	
9.	Food & Household	Target % _____	Actual % 
10.	Health	Target % _____	Actual % _____
	Fitness	\$ _____	Gym, Sports Leagues
	Medical Expenses	\$ _____	Doctor, dentist, chiropractor, prescriptions
	Counselor	\$ _____	
	Other	\$ _____	
11.	Personal	Target % _____	Actual % 
	Child Care	\$ _____	
	Education	\$ _____	Tuition & supplies (books, uniforms, etc.)
	Beauty & Barber	\$ _____	Haircuts, nails and the spa
	Clothes	\$ _____	
	Household Décor	\$ _____	Furniture, decor, home improvements
	Cell Phone	\$ _____	
	Gifts	\$ _____	Christmas, birthday, anniversary
	Cleaning	\$ _____	Dry cleaning, laundry, house cleaning
	Financial Services	\$ _____	Tax prep, software, financial planning
	Security System	\$ _____	




# Spending Plan

Pest Control \$ \_\_\_\_\_  
 Landscaping \$ \_\_\_\_\_  
 Pets \$ \_\_\_\_\_  
 Other \$ \_\_\_\_\_

Lawn service, plants, lawn care supplies  
 Food and care

12. Entertainment Target % \_\_\_\_\_  
 Vacation \$ \_\_\_\_\_  
 Eating Out \$ \_\_\_\_\_  
 Events \$ \_\_\_\_\_  
 Reading \$ \_\_\_\_\_  
 TV \$ \_\_\_\_\_  
 Technology \$ \_\_\_\_\_  
 Internet \$ \_\_\_\_\_  
 Music \$ \_\_\_\_\_  
 Other \$ \_\_\_\_\_

Actual %   
 Family trips, summer activities  
 Movies, theater, shows  
 Books, magazines, newspaper  
 Cable, satellite, TiVO, rentals, equipment  
 Computer, peripherals, software, PDA  
 DSL, cable modem, dial-up  
 iPod, albums, downloads, satellite radio

13. Total Spending 

MARGIN 