

Income Worksheet

**Monthly Gross
Income**

Total For Section

Salary and wages \$ _____
Bonuses and Fringe \$ _____
Benefits \$ _____
Child Support \$ _____
Alimony \$ _____
Social Security \$ _____
Retirement Income \$ _____
Disability Payments \$ _____
Unemployment \$ _____
Worker's Comp \$ _____
AFDC \$ _____
Dividends \$ _____
Interest Income \$ _____
Business Income \$ _____
Rental Income \$ _____
Other income \$ _____

Total Gross Income (copy this number to the \$ _____
right)

**Deductions From
Income**

Taxes \$ _____
Health Ins. \$ _____
Other Deductions \$ _____
Savings \$ _____
401K \$ _____

Total Deductions (copy this number to the \$ _____
right)

Total Gross Income \$ _____
(minus) Total - \$ _____
Deductions

Monthly Available = \$ _____
Income (copy this number to the \$ _____
right)

Expense Worksheet

When filling out this free budget worksheet, if an expense is incurred less often than monthly, convert it to a monthly amount when calculating the monthly budget amount. For example, if an item occurs only once a year, divide the amount by twelve to get the monthly amount. Just be sure to allocate money from your income to cover that expense when it happens.

Housing Expense

Total For Section

- Mortgage \$ _____
- Home Insurance \$ _____
- Property Taxes \$ _____
- Repairs \$ _____
- Rent \$ _____
- Renters Insurance \$ _____
- Lawn Care & Services \$ _____

Total Housing Expenses

(copy this number to the right)

\$ _____ **Housing**

Utilities

- Gas \$ _____
- Electric \$ _____
- Phone \$ _____
- Cable \$ _____
- Water/Trash \$ _____
- Sewer \$ _____
- Internet \$ _____
- Cell Phone \$ _____
- Storage Fees \$ _____

Total Utilities

(copy this number to the right)

\$ _____ **Utilities**

Children

- School Tuition \$ _____
- School Lunches \$ _____
- School Supplies/Tutoring \$ _____
- Team Fees \$ _____
- School Photos \$ _____
- Allowances \$ _____
- Camps \$ _____
- Recreation \$ _____
- Sports Fees \$ _____
- Babysitting \$ _____
- Daycare \$ _____
- Diapers \$ _____
- Formula \$ _____
- Child Support \$ _____

Total Child Expense

(copy this number to the right)

\$ _____ **Children**

Financial

Bank Fees \$ _____
Check Printing Fees \$ _____
Safety Deposit Fees \$ _____
Spending Cash \$ _____
Bank Loan #1 \$ _____
Bank Loan #2 \$ _____
Student Loans \$ _____
Auto Loans \$ _____
Credit Card #1 \$ _____
Credit Card #2 \$ _____
Credit Card #3 \$ _____
Credit Card #4 \$ _____
Other \$ _____

Total Financial Expenses

(copy this number to \$ _____ **Financial** the right)

Transportation

License Renewal \$ _____
Gasoline \$ _____
Auto Insurance \$ _____
Tires \$ _____
Maintenance/Oil Changes \$ _____
Tolls \$ _____
Taxi \$ _____
Bus Fare \$ _____

Total Transportation

(copy this number to \$ _____ **Transportation** the right)

Health

Doctor \$ _____
Dental \$ _____
Eye Care \$ _____
Annual Physical \$ _____
Prescriptions \$ _____
Glasses \$ _____
Health Insurance \$ _____
Life Insurance \$ _____

Total Health Expenses

(copy this number to \$ _____ **Health** the right)

Household / Pets

Groceries \$ _____
Cleaning Goods \$ _____
Office Supply \$ _____
Pet Care \$ _____
Pet Boarding \$ _____
Vaccinations \$ _____
Supplies \$ _____

Total House Expenses

\$ _____ **Household**

(copy this number to the right)

Gifts

- Holidays \$ _____
- Birthdays \$ _____
- Weddings \$ _____
- Graduations \$ _____
- General Cards \$ _____
- Christmas Cards \$ _____
- Wrapping Supplies \$ _____
- Shipping \$ _____

Total Gift Expenses (copy this number to the right) \$ _____ **Gifts**

Personal

- Eating Out \$ _____
- Clothing \$ _____
- Haircuts \$ _____
- Nails \$ _____
- Salon \$ _____
- Magazines \$ _____
- Newspaper \$ _____
- Charities \$ _____
- Club Dues \$ _____
- Entertainment \$ _____
- Movies \$ _____
- Hobbies \$ _____
- Magazines \$ _____
- Newspapers \$ _____
- Dues/memberships \$ _____
- Other \$ _____

Total Personal Expenses (copy this number to the right) \$ _____ **Personal**

Calculating Total Expenses on your free budget worksheet

Total Monthly Expenses

- Housing** \$ _____
- Utilities** \$ _____
- Children** \$ _____
- Financial** \$ _____
- Transportation** \$ _____
- Health** \$ _____
- Household** \$ _____
- Gifts** \$ _____
- Personal** \$ _____

Total Monthly Expenses (copy this number to the right) \$ _____

the right)

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