

ANNUAL HOUSEHOLD BUDGET



Enter monthly income and expense amounts in the appropriate monthly amount column, the annual amount will automatically calculate and subtotal in Excel. If certain items do not occur monthly, simply estimate the annual amount, divide by 12 and enter in the monthly amount column. Please complete to the best of your ability and sign on the last page.

	Monthly Amount	Annual Amount
INCOME (Inflow)		
Client's Gross Income	\$	-
Spouse's Gross Income	\$	-
Client's Social Security Income	\$	-
Spouse's Social Security Income	\$	-
Client's Pension Income	\$	-
Spouse's Pension Income	\$	-
Other Income - Rental / K-1's / Etc.	\$	-
Gifts or other INFLOW of Cash	\$	-
TOTAL INCOME & GIFTS		\$ -

EXPENSES (Outflow)

Housing

Real Estate Taxes	\$	-
Mortgage Payment (Principal & Interest)	\$	-
Home Equity Payments	\$	-
Home Owner's Insurance	\$	-
Rent	\$	-
Co-Op or Association Dues	\$	-
Telephone	\$	-
Gas or Oil Heat	\$	-
Electricity	\$	-
Cable/Satellite TV	\$	-
Water	\$	-
Yard Care	\$	-
House Cleaning	\$	-
Total Housing Expenses		\$ -

Food/Clothing/Transportation

Grocery Shopping	\$	-
Clothing & Laundry	\$	-
Other	\$	-
Auto Maintenance	\$	-

	Monthly Amount	Annual Amount
Auto Insurance	\$	-
Auto Loan or Lease Payment #1	\$	-
Auto Loan or Lease Payment # 2	\$	-
Auto Loan or Lease Payment # 3	\$	-
Gas and Oil	\$	-
License & Registration Costs	\$	-
Public Transportation	\$	-
Parking & Tolls	\$	-
Total Food/Clothing/Transportation Expenses		\$ -

Other Committed Expenses

Education (Children)	\$	-
Education (Advanced/Graduate)	\$	-
Personal Care/Make-up	\$	-
Medical	\$	-
Dental Care	\$	-
Prescriptions/Vitamins	\$	-
Optician & Glasses	\$	-
	\$	-
Child Support/Alimony	\$	-
Child Care/Baby-sitting	\$	-
Lessons	\$	-
Children's Allowances	\$	-
	\$	-
Credit Card Payments	\$	-
Personal Loans	\$	-
Other Loan Payments	\$	-
	\$	-
Life Insurance Payments	\$	-
Disability Insurance Payments	\$	-
Medical Insurance Payments	\$	-
Total Other Committed Expenses		\$ -

Savings & Investment

Systematic Savings	\$	-
	\$	-
Client's IRA	\$	-
Spouse's IRA	\$	-
Client's 401k/403b	\$	-
Spouse's 401k/403b	\$	-
Pension Contributions	\$	-
529 Plan(s) or Similar	\$	-
Total Savings and Investment		\$ -

Discretionary Expenses

Entertainment/Dining	\$	-
Lunch at Work	\$	-
	\$	-
Recreation & Hobbies	\$	-
Boat Loan	\$	-
Boat Fuel - Dock - Maint. - Other	\$	-
Vacation	\$	-

