Monthly Non-Bill Expenses		_	_	_	_	_	TOTALS
Grocery							
Non-Grocery Items							
Eating Out							
Car Gas							
Pet Care							
Medicine							
Donations							
Misc. Expenses							
TOTAL							
		1	T		T		
Monthly Bills		_	_	_	_	_	TOTALS
Car Insurance							
Car Note							
Water							
Gas (home)							
Electricity							
Student Loan							
Life insurance							
Mortgage							
Credit Card							
Cell Phones							
Cable/Internet/Phone							
TOTAL							

	Goal Totals	Actual Totals
Monthly Income		
Savings		
Individual Allowance		
Monthly Spending		
Total Money Remaining		

	Month:
	Year: