

# Planned Budget after Home Ownership

Name of Applicants: \_\_\_\_\_

## Income

Applicant Name	Source of Income	Monthly Gross	Monthly Take Home
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**Include all sources of income, including assistance**			

**Total Income (A)**

To find gross monthly income, multiply hourly wage by hours worked per week.

Then multiply that number by 52.

Then divide by 12.

## Expenses

	Expenses	Monthly Sub-totals	Monthly Totals
<b>Housing</b>			
	Mortgage	\$	
	Home Owners Insurance	\$	
	Property Taxes	\$	
	sub-total	\$	\$
<b>Utilities</b>			
	Electric/Gas/Oil	\$	
	Garbage/Recycling/Water	\$	
	Phone(s)	\$	
	Cable/Internet	\$	
		\$	
	sub-total	\$	\$
<b>Automobile</b>			
	Auto Insurance (all)	\$	
	Vehicle Payment (1)	\$	
	Vehicle Payment (2)	\$	
	Vehicle registration	\$	
	Auto Maintenance	\$	
	sub-total	\$	\$

<b>Food</b>			
	Groceries	\$	
	School lunches	\$	
	Eating Out	\$	
	sub-total	\$	\$
<b>Clothing</b>			
		\$	\$
<b>Insurance</b>			
	Medical	\$	
	Dental/Vision	\$	
	Supplemental	\$	
	Life Insurance	\$	
	sub-total	\$	\$
<b>Health Care</b>			
	Prescriptions	\$	
	Bill Payment	\$	
		\$	
	sub-total	\$	\$
<b>Installment Loans</b>			
	Student Loan(s)	\$	
	Credit card(s)	\$	
	Other (describe)	\$	
	sub-total	\$	\$
<b>Leisure and Charitable</b>			
	Gifts	\$	
	Holiday Expense	\$	
	Entertainment (movies, etc)	\$	
	Donations	\$	
	Other	\$	
	sub-total	\$	\$
<b>Payroll Taxes/Deductions</b>			
	FICA-SS	\$	
	FICA-Med	\$	
	FIT		
	SIT		
	Retirement	\$	
	Dues/Fees	\$	
	Other deductions	\$	
	sub-total	\$	\$

Miscellaneous			
	Personal Care Items	\$	
	Daycare Expense	\$	
	School Expense	\$	
	Pet Expenses	\$	
	Vacation	\$	
	Other Miscellaneous	\$	
	Other Miscellaneous	\$	
	sub-total	\$	\$
	<b>Total Expenses (B)</b>		\$

**Gross Monthly Income (A) - Expenses (B) =  
Net Monthly Income**

\$

My/Our budget goal is to: \_\_\_\_\_

This is my/our budget. I/We understand that housing stability comes from paying close attention to our budget. I/We will strive our best to live within our means in order to reach my/our budget goals.

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_