

Month

Year

# 30-Day Diary

Category	INCOME	TITHE/GIVING	TAXES	HOUSING	FOOD	TRANSPORTATION	INSURANCE
BUDGETED AMOUNT	\$	\$	\$	\$	\$	\$	\$
Date							
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
This month SUBTOTAL	\$	\$	\$	\$	\$	\$	\$
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							
This month TOTAL	\$	\$	\$	\$	\$	\$	\$
This month SURPLUS/DEFICIT	\$	\$	\$	\$	\$	\$	\$
Year to Date BUDGET	\$	\$	\$	\$	\$	\$	\$
Year to Date TOTAL	\$	\$	\$	\$	\$	\$	\$
Year to Date SURPLUS/DEFICIT	\$	\$	\$	\$	\$	\$	\$

	<b>This Month</b>		<b>Previous Month/Year to Date</b>		<b>Year to Date</b>
<b>BUDGET SUMMARY</b>	Total Income \$ _____	+	Total Income \$ _____	=	Total Income \$ _____
	Minus Total Expenses \$ _____		Minus Total Expenses \$ _____		Minus Total Expenses \$ _____
	Equals Surplus/Deficit \$ _____		Equals Surplus/Deficit \$ _____		Equals Surplus/Deficit \$ _____



# LIST OF DEBTS

as of \_\_\_\_\_

To Whom Owed	Contact Name	Pay Off	Payments Left	Monthly Payment	Date Due	Interest Rate
	Phone Number					

# FINANCIAL STATEMENT

as of \_\_\_\_\_

<b>ASSETS</b>		<b>LIABILITIES<sup>4</sup></b>	
<b>Liquid Assets<sup>1</sup></b>			
	\$ _____		\$ _____
<b>Total Liquid Assets</b>	\$ _____	<b>TOTAL LIABILITIES</b>	\$ _____
<b>Invested Assets<sup>2</sup></b>			
	\$ _____		
<b>Total Invested</b>	\$ _____	<b>NET WORTH</b>	\$ _____
		(Assets-Liabilities)	
<b>Use Assets<sup>3</sup></b>			
	\$ _____		
		<b>TOTAL LIABILITIES</b>	
<b>Total Use Assets</b>	\$ _____	<b>AND NET WORTH</b>	\$ _____
<b>TOTAL ASSETS</b>	\$ _____		

<sup>1</sup> Cash, Savings Accounts, Checking Accounts  
<sup>2</sup> IRAs, TSAs, 401(K)s, Investment, Real Estate, CDs, Antiques presented at fair market value.  
<sup>3</sup> Residence, Autos, Personal Belongings presented at fair market value.  
<sup>4</sup> Outstanding Real Estate Loans, Credit Cards, Auto Loans, Personal Loans.

# INCOME ALLOCATION

INCOME		INCOME SOURCE/PAY PERIOD			
BUDGET CATEGORY	MONTHLY ALLOCATION				
1. Tithe					
2. Tax					
3. Housing					
4. Food					
5. Auto					
6. Insurance					
7. Debts					
8. Entertainment/ Recreation					
9. Clothing					
10. Savings					
11. Medical/Dental					
12. Miscellaneous					
13. School/Child Care					
14. Investments					
15. Unallocated Surplus Income					

# MONTHLY INCOME AND EXPENSES

**GROSS INCOME PER MONTH** \_\_\_\_\_

Salary \_\_\_\_\_  
 Interest \_\_\_\_\_  
 Dividends \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_

**LESS:**

**1. Tithe** \_\_\_\_\_  
**2. Tax** (Est. - Incl. Fed., State, FICA) \_\_\_\_\_

**NET SPENDABLE INCOME**           

**3. Housing** \_\_\_\_\_  
 Mortgage (rent) \_\_\_\_\_  
 Insurance \_\_\_\_\_  
 Taxes \_\_\_\_\_  
 Electricity \_\_\_\_\_  
 Gas \_\_\_\_\_  
 Water \_\_\_\_\_  
 Sanitation \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Maintenance \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_

**4. Food** \_\_\_\_\_

**5. Automobile(s)** \_\_\_\_\_  
 Payments \_\_\_\_\_  
 Gas and Oil \_\_\_\_\_  
 Insurance \_\_\_\_\_  
 License/Taxes \_\_\_\_\_  
 Maint./Repair/Replace \_\_\_\_\_

**6. Insurance** \_\_\_\_\_

Life \_\_\_\_\_  
 Medical \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_

**7. Debts** \_\_\_\_\_

Credit Card \_\_\_\_\_  
 Loans and Notes \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_

**8. Enter./Recreation** \_\_\_\_\_

Eating Out \_\_\_\_\_  
 Baby Sitters \_\_\_\_\_  
 Activities/Trips \_\_\_\_\_  
 Vacation \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_

**9. Clothing** \_\_\_\_\_

**10. Savings** \_\_\_\_\_

**11. Medical Expenses** \_\_\_\_\_

Doctor \_\_\_\_\_  
 Dentist \_\_\_\_\_  
 Drugs \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_

**12. Miscellaneous** \_\_\_\_\_

Toiletry, cosmetics \_\_\_\_\_  
 Beauty, barber \_\_\_\_\_  
 Laundry, cleaning \_\_\_\_\_  
 Allowances, lunches \_\_\_\_\_  
 Subscriptions \_\_\_\_\_  
 Gifts (incl. Christmas) \_\_\_\_\_  
 Cash \_\_\_\_\_  
 Internet \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_

**13. Investments** \_\_\_\_\_

**14. School/Child Care** \_\_\_\_\_

Tuition \_\_\_\_\_  
 Materials \_\_\_\_\_  
 Transportation \_\_\_\_\_  
 Day Care \_\_\_\_\_  
 Other (\_\_\_\_\_) \_\_\_\_\_

**TOTAL EXPENSES**           

**INCOME VERSUS EXPENSES**

**Net Spendable Income** \_\_\_\_\_

**Less Expenses** \_\_\_\_\_