



# Spending Planner

## A. SPENDABLE MONTHLY INCOME:

	Historical	Current
Gross Monthly Income	_____	_____
Less Taxes – FICA	_____	_____
Medicare	_____	_____
Federal Income Tax	_____	_____
State Income Tax	_____	_____
Other Tax	_____	_____
<b>Total Spendable Monthly Income</b>	_____	_____

## B. SPENDING CATEGORY EXPENSES:

Spending Category	Last 12 Months Totals	Last 12 Mo. Avg Per Mo.	Next 12 Mo. Avg Per Mo.	Fixed Expense	Variable Expense	You \$	Spouse \$
Auto - Gas/Repair	_____	_____	_____	_____	_____	_____	_____
Charitable Contributions	_____	_____	_____	_____	_____	_____	_____
Cleaning/Laundry	_____	_____	_____	_____	_____	_____	_____
Clothing	_____	_____	_____	_____	_____	_____	_____
Debt Payment	_____	_____	_____	_____	_____	_____	_____
Eating Out	_____	_____	_____	_____	_____	_____	_____
Family Activities	_____	_____	_____	_____	_____	_____	_____
Gifts	_____	_____	_____	_____	_____	_____	_____
Groceries	_____	_____	_____	_____	_____	_____	_____
Home Maintenance	_____	_____	_____	_____	_____	_____	_____
Insurance	_____	_____	_____	_____	_____	_____	_____
Medical/Dental	_____	_____	_____	_____	_____	_____	_____
Miscellaneous	_____	_____	_____	_____	_____	_____	_____
Property Tax	_____	_____	_____	_____	_____	_____	_____
Car/Home	_____	_____	_____	_____	_____	_____	_____
Utilities	_____	_____	_____	_____	_____	_____	_____
Emergency	_____	_____	_____	_____	_____	_____	_____
Emotional	_____	_____	_____	_____	_____	_____	_____
Long-term	_____	_____	_____	_____	_____	_____	_____
Recreation/Entertainment	_____	_____	_____	_____	_____	_____	_____
Vacations/Trips	_____	_____	_____	_____	_____	_____	_____
<b>Total Expenses</b>	_____	_____	_____	_____	_____	_____	_____

Savings —