

## G.O.O.D. FILE (Budget)

Monthly Salary: _____	Restaurants: _____
Other Income: _____	Movies/Concerts: _____
<b>Total Income:</b> _____	Babysitter: _____
<b>Subtract:</b>	Vacation: _____
Tithe: _____	Other: _____
Taxes: _____	<b>Total Entertainment Expenses:</b> _____
<b>Monthly Spendable Income:</b> _____	<b>Clothing:</b> _____
Mortgage/Rent: _____	Dentist: _____
Insurance: _____	Doctor: _____
Taxes: _____	Prescriptions: _____
Electric: _____	<b>Total Medical Payments:</b> _____
Gas: _____	<b>Savings:</b> _____
Water: _____	Childcare/school: _____
Satellite/Cable: _____	Cell phone: _____
Phone/Internet: _____	Haircuts/nails: _____
Maintenance: _____	Dry cleaning: _____
Other: _____	Lunches: _____
<b>Total Housing Expenses:</b> _____	Toiletries: _____
<b>Groceries:</b> _____	Subscriptions: _____
Auto Payments: _____	Allowance/cash: _____
Gas: _____	Holiday/Birthday Gifts: _____
Auto Insurance: _____	<b>Total Personal Expenses:</b> _____
Other: _____	<b>Total Expenses:</b> _____
<b>Total Auto Expenses:</b> _____	<b>Monthly Spendable Income:</b> _____
Medical: _____	<b>Less Total Expenses:</b> _____
Life: _____	<b>Surplus (Deficit):</b> _____
Health: _____	
<b>Total Insurance Payments:</b> _____	