

## HOUSEHOLD BUDGET - WEEKLY EXPENSES TRACKING

**MONTH:** \_\_\_\_\_

**Expenses Tracking** - Keep all receipts (including cash purchases). At the end of the week use the itemized receipts to add expenses by category (i.e. groceries items, snacks, toiletries, gas, bridge tolls, etc.) and add totals to the spreadsheet. Refer back to your household budget to make sure you are staying on track with your spending plan. If you are not (i.e. budgeted \$400 for monthly groceries expense. In week 3 your running total is \$350 which leaves \$50 for the rest of the month) determine why. Did you spend more than needed? Did you underestimate your expenses for that category? Use this information to help you stay on track and readjust your budget if needed.

<b>MONTHLY NET INCOME</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Wages Employment (After Tax)						
Wages Employment (After Tax)						
Self-Employment (before business-related deductions)						
SSI						
Disability (SSDI)						
Child Support or Alimony						
Public Assistance (Food Stamps, Cash Aid)						
Veteran's Compensation						
Unemployment						
Other (i.e. periodic/seasonal, bonus, tax refund)						
<b>TOTAL NET MONTHLY INCOME</b>						
<b>SAVINGS</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Emergency Savings Plan						
Long Term Savings Plan						
<b>TOTAL MONTHLY SAVINGS PLAN</b>						
<b>HOUSING EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Mortgage or Rent						
Homeowners or Renters Insurance						
Maintainance/Repairs						
Landscaping						
Property Taxes						
Cleaning Supplies						
Other (i.e. laundry)						
<b>TOTAL HOUSING EXPENSES</b>						
<b>UTILITIES EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Gas and Electricity						
Water						
Trash						
Home Phone						
Cell Phone						
Internet Service						
Cable						
<b>TOTAL UTILITIES EXPENSES</b>						
<b>FOOD EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Groceries						
Eating Out						
Other (snacks, water, coffee, school lunches)						
<b>TOTAL FOOD EXPENSES</b>						
<b>FAMILY EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Child Support/Alimony (Paid)						
Day Care, Babysitting						
Education (tuition, books, etc.)						
Life Insurance						
Back to school costs (clothes, books, school supplies)						
Other (i.e. sports, helping family, parties, etc.)						
<b>TOTAL FAMILY EXPENSES</b>						

**Expenses Tracking** - Keep all receipts (including cash purchases). At the end of the week use the itemized receipts to add expenses by category (i.e. groceries items, snacks, toiletries, gas, bridge tolls, etc.) and add totals to the spreadsheet. Refer back to your household budget to make sure you are staying on track with your spending plan. If you are not (i.e. budgeted \$400 for monthly groceries expense. In week 3 your running total is \$350 which leaves \$50 for the rest of the month) determine why. Did you spend more than needed? Did you underestimate your expenses for that category? Use this information to help you stay on track and readjust your budget if needed.

<b>HEALTH AND MEDICAL EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Health Insurance (out of pocket, i.e. co-pays)						
Dental Insurance (out of pocket, i.e. co-pays)						
Vision Insurance (out of pocket, i.e. co-pays)						
Prescription Medicines						
Vitamins/Supplements						
Other (i.e. gym memberships)						
<b>TOTAL HEALTH AND MEDICAL EXPENSES</b>						
<b>TRANSPORTATION EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Vehicle #1 Payment (Car, motorcycle, RV)						
Vehicle #2 Payment (Car, motorcycle, RV)						
Vehicle #3 Payment (Car, motorcycle, RV)						
Gasoline						
Maintenance (i.e. oil changes, regular maintenance)						
Repairs (i.e. brakes, tires, etc.)						
Car Insurance						
Car Registration						
Parking, bridge tolls, etc.						
Public Transportation (i.e. BART, Caltrain)						
Other (i.e. Uber, Lyft, AAA membership)						
<b>TOTAL TRANSPORTATION EXPENSES</b>						
<b>ENTERTAINMENT EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
TV Subscriptions (i.e. Netflix, Hulu)						
Video/DVD Rentals (i.e. Red Box, On Demand)						
Movies/Plays/Concerts						
Subscriptions (i.e. magazines, music apps, etc.)						
Vacations						
Other (i.e. sports games, recreation parks, museums)						
<b>TOTAL ENTERTAINMENT EXPENSES</b>						
<b>BUSINESS RELATED EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Office Rent						
Equipment						
Transportation						
Income Tax						
Other (i.e. licenses etc.)						
<b>TOTAL BUSINESS-RELATED EXPENSES</b>						
<b>PERSONAL CARE EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Clothes and Shoes						
Grooming (Toiletries, shampoo, make-up, etc.)						
Other (i.e. haircuts, haircolor, nails)						
<b>TOTAL PERSONAL CARE EXPENSES</b>						
<b>DEBT PAYMENTS</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Credit Cards Payments						
Student Loans Payment(s)						
Other Loans (i.e. personal, business, etc)						
<b>TOTAL MONTHLY DEBT PAYMENTS</b>						
<b>MISCELLANEOUS EXPENSES</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Week 5</b>	<b>Month Total</b>
Charitable giving						
Pets (Food, vet, grooming, boarding)						
Allowances for children/dependents						
Gifts to others (birthdays, holidays, weddings, etc.)						
Other (i.e. dry cleaning, storage, etc.)						
<b>TOTAL MISCELLANEOUS EXPENSES</b>						
<b>TOTAL MONTHLY EXPENSES</b>						
						<b>BALANCE</b> (monthly net income minus monthly savings, expenses and debt payments)