

Household Budget

Name: _____

Monthly Income	
Male	
Female	
Other	
Total	



for a Lifetime

Budget Category	Monthly	Other than Monthly	Total
God's Church			
God's Tithe (10%)			
Church Budget Offerings (%)			
Other Offerings			
Total			
Housing			
Mortgage/rent			
Insurance			
Property Taxes			
Electricity			
Gas			
Water			
Sanitation			
Cleaning			
Telephone			
Repairs/maintenance			
Supplies			
Other			
Total			