

S – Specific M – Measurable A – Actionable R – Realistic T – Time- Bound
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What are your short-term goals (within the next 3 – 12 months)?

Goal #1- _____

Goal #2- _____

Goal #3- _____

**Circle the one that is your biggest priority and answer the following questions:*

Amount of Money Needed - _____

Time Frame to Complete - _____

▲ **How Much Money Should You Save Each Month?** (amount of money needed ÷ number of months) _____

Steps You Need to Take to Accomplish This Goal-

1. _____

2. _____

3. _____

4. _____

What are your long-term goals (12 or more months from now)?

Goal #1- _____

Goal #2- _____

Goal #3- _____

**Circle the one that is your biggest priority and answer the following questions:*

Amount of Money Needed - _____

Time Frame to Complete - _____

★ **How Much Money Should You Save Each Month?** (amount of money needed ÷ number of months) _____

Steps You Need to Take to Accomplish This Goal-

1. _____

2. _____

3. _____

4. _____

Monthly Budget

INCOME	Budgeted	Actual
Jobs (monthly take home)		
From Family		
From Public Assistance		
From Financial Aid/Scholarships/Student Loans		
Other		
TOTAL Income		
SAVINGS EXPENSES		
Emergency Fund (Amount Needed: \$)		
Short-Term Goal (Amount Needed: \$)	▲	
Long-Term Goal (Amount Needed: \$)	★	
Retirement (Amount Needed: \$)		
HOME RELATED EXPENSES		
Rent/Mortgage		
Renters/Home Owners Insurance		
Home Owners Association Dues		
Security System		
Storage Unit		
Furniture/Rent-to-Own		
Telephone (home) & Cell Phone(s)		
Internet/Cable		
Electric/Water/Gas		
TRANSPORTATION EXPENSES		
Car Payment (Auto Loan)		
Auto Insurance		
Gas		
Maintenance and Repair/Car Registration and Inspection		
Bus, Taxi, Train Fare, Tolls		
FOOD & GROCERY EXPENSES		
Groceries		
Toiletries & Cleaning Products		
Eating Out/Carry Out/Home Delivery		
DEBTS/PAYMENTS		
Personal Loans (bank, payday, title, line of credit, etc) (Debt Total: \$ _____)		
Credit Cards (Outstanding Balance: \$ _____)		
Student Loans (Debt Total: \$ _____)		
Bank & ATM Fees		
CHILDREN		
Daycare, after school care		
Children's school/activity expenses		
HEALTH, PERSONAL, & MISCELLANEOUS		
Dental/Orthodontist		
Doctor/Medication Co-Pay		
Personal Care/Grooming (make-up, nails, tanning, haircuts, etc)		
Clothing		
Laundromat/Dry Cleaning		
Charities/Religious Contributions		
Entertainment (movies, sports, gym, music, DVD rental, lottery, etc)		
Holiday/Birthday/Wedding		
Pet Food/Supplies/Vet		
Cigarettes/Tobacco Products/Liquor/Beer/Wine		
TOTAL Expenses		
Difference (+/-) between Income and Expenses		

Living Wage Formula: Determine how much money you need to earn (per hour) to meet expenses. Total Monthly Expenses _____ divided by 163 (hours per month) = \$ _____ (per hour)