

Where Does Your Money Go? **Spending-Savings Plan Worksheet**

My Goal:		V	VHAT	IS YOUR I	NCC	DME?		
Directions: List the amount of	Source of Income			Weekly Amount (x 4)		Every Two eeks Amou (x 2)	nt Monthly Amount (x1)	Total
income in the column that reflects how often	Wages	Wages						
you are paid. Determine the total monthly amount received from each income source. Record that amount in the Total column. Add all amounts in the Total column for your monthly income.	Child Support Payment							
		Social Security						
	Unemployment Benefits		t					
	Food St	Food Stamps						
	Additio	Additional Income						
					Tota	al Income fo	r the Month	
WHAT	REGULA	AR EXP	ENSES	S DO YOU	HAV	/E EACH N	MONTH?	
Plan to save a portion			How much can you say		ve each	Total Saved I	Total Saved Each Month	
of your income each month.	Savir	Savings .		veek?				
						Due Date	Amount Due	Amount Paid
 "Housing" refers to: Mortgage payment, rent, lease, etc. Blank spaces can be used for additional expenses such as: rent-to-own contracts, cell phone, additional credit cards, etc. It is <u>strongly encouraged</u> that you try to pay off your credit card bills in full each month. If that's not a possibility, pay more than the minimum due. 		Housing						
		Car						
		Insura						
		Heat/Gas						
		Electric						
		Water/Sewage						
		Phone Garbage						
		Cable/TV						
		Support payment						
		Credit card						
		Prescriptions						
		Education:Tuition			s			
			Total	Regular Mo	nthly	v Expenses		

Total Regular Monthly Expenses

EXPENSES CONTROLLED BY YOU						
The amount spent in each of these categories reflects the choices made at the time of purchase.	Expense Category	Weekly Amount Planned	Monthly Amount Planned	Monthly Amount Spent		
Did you buy what you needed or give in to your wants?	Food: groceries, eating out, school lunch					
Dian shood for expenses	Transportation					
Plan ahead for expenses.Buy what you need.	Clothing					
•If you go over your planned amount	Personal & Recreation					
how will you make up the difference?Did you make any impulse buys?	Medical					
	Education: Supplies					
	Household & Furnishings					
			mount Spent ble Expenses			

EXPENSES CONTROLLED BY YOU

OCCASIONAL EXPENSES

Some expenses come once or twice a year, but they still need to be planned so money is available for	Monthly
them. These might include birthdays, holidays, back-to-school expenses, license plates, oil changes,	Amount
car expenses, etc.	Needed

SPENDING-SAVINGS PLAN SUMMARY

If the "What's Left" amount is positive, GREAT! Keep making good choices. If	Total Monthly Income	
"What's Left" is a negative number, then	Subtract Total Saved Each Month	-
you have three choices:	Subtotal	
1. Increase income	Subtract Total Monthly Regular Expenses	-
2. Reduce expenses	Subtotal	
3. Some of both 1 & 2	Subtract Total Monthly Controllable Expenses	-
	Subtotal	
	Subtract amount needed for Occasional Expenses	-
	What's Left	

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