

# CAMBRIDGE

CREDIT COUNSELING CORP

## Comprehensive Monthly Budget

Name: \_\_\_\_\_

Month: \_\_\_\_\_

Year: \_\_\_\_\_

### GENERAL

|                                      |  |  |  |
|--------------------------------------|--|--|--|
| Marital Status:                      |  | Number of Dependents                   |  |
| Number of Exemptions Claimed         |  | Secondary Level of Education Completed |  |
| Primary Level of Education Completed |  |  |  |

### HOME

|                        |  |
|------------------------|--|
| 1st Mortgage           |  |
| All Other Mortgages    |  |
| 1st Equity Loan        |  |
| All Other Equity Loans |  |
| Rent                   |  |
| Home Insurance         |  |
| Property Taxes         |  |
| Condo Fees             |  |
| Lot Rent               |  |
| Security System        |  |
| Lawn Care              |  |
| Other - Home           |  |

### LIVING

|                               |  |
|-------------------------------|--|
| Groceries                     |  |
| Lunch/Snacks at work          |  |
| Restaurants/Take Out          |  |
| Clothing                      |  |
| Laundry/Dry Cleaning          |  |
| Religious/Charity Donations   |  |
| Movies/Concerts/Sports Events |  |
| Video Rentals/Services        |  |
| Pet Care                      |  |
| Hobbies/Habits                |  |
| Hair Cuts/Beauty Shop         |  |
| Birthdays/Gifts               |  |
| Vacations                     |  |
| Other-Living                  |  |

### UTILITIES

|                       |  |
|-----------------------|--|
| Electric              |  |
| Gas/Propane           |  |
| Oil                   |  |
| Water/Sewer           |  |
| Garbage/Trash Removal |  |
| Home Phone            |  |
| Cable/Satellite       |  |
| Internet              |  |
| Bundled Services      |  |
| Cell Phone            |  |
| Other - Utilities     |  |

### CHILD CARE

|                   |  |
|-------------------|--|
| Day Care          |  |
| Child Support     |  |
| Schooling/Tuition |  |
| School Lunches    |  |
| Baby Sitting      |  |
| Activities        |  |
| Sports            |  |
| Allowances        |  |
| Other-Child Care  |  |

### AUTO

|                       |  |
|-----------------------|--|
| 1st Auto Loan         |  |
| All Other Auto Loans  |  |
| Auto Insurance        |  |
| Gas                   |  |
| Maintenance           |  |
| Public Transport/Taxi |  |
| Parking/Tolls         |  |
| Auto Inspection       |  |
| Registration Fees     |  |
| Excise Taxes          |  |
| Other - Auto          |  |

### MEDICAL & INSURANCE

|                           |  |
|---------------------------|--|
| Health Insurance          |  |
| Life Insurance            |  |
| Other-Insurance           |  |
| Doctor Bills              |  |
| Dentist Bills             |  |
| Prescriptions             |  |
| Doctor Visits/Deductibles |  |
| Other-Medical             |  |

### INCOME

|                                      |  |
|--------------------------------------|--|
| Primary Gross Income Monthly         |  |
| Primary Net Income Monthly           |  |
| Secondary (if married) Gross Monthly |  |
| Secondary (if married) Net Monthly   |  |
| Any other Sources of Income          |  |
| Estimated Annual Tax Return          |  |

### ASSETS

|                  |  |
|------------------|--|
| Home Equity      |  |
| Checking-Savings |  |
| Money Market     |  |
| Other            |  |
| Other            |  |