

BIBLICAL FINANCIAL SPENDING PLAN

Income

Income Sources	You	Spouse	Monthly Total
Wages/Pension (net)			
Interest/Dividends			
Other			

Line 1

Income Total			
---------------------	--	--	--

Expenses (Basic Needs)

Description	Amount
Tithes	
Savings	
Mortgage/Rent	
Child Care	
Clothing	
Electricity	
Gas/home	
Oil	
Water/Sewage	
Telephone	
Car Payment	
Gas/car	
Auto Insurance	
Life Insurance	
Medical Insurance	
Dental Insurance	
Vision Insurance	
Medical Co-pay	
Prescriptions	
Medicines (Other)	

Line 2

Total Expenses			
-----------------------	--	--	--

Line 3

Net Income Available Wants (line 1 minus line 2)		#1	
---	--	-----------	--

Expenses (Wants)

Description	Amount
Cable/Satellite TV	
Pet/Vet	
Home Security	
Lawn Service	
Housecleaning Service	
Home Improvement	
Garden Supplies	
Cellular Telephone	
Internet Provider	
Dry Cleaning	
Salon/Barber	
Mag/News/Books	
Dining Out	
Theater/Night Club	
Movies/Concerts	

