



HOUSEHOLD BUDGET PLANNER

Name: _____

Date: _____

INTRODUCTION

Understanding your regular expenses is essential to understanding your income needs. This budget form is designed for you to have a good understanding of what it costs to live on an annual basis.

COMPLETING THE FORM

What we are after is the 'Annual' total for any particular item and the Annual total for all items combined. The weekly, monthly and quarterly columns are there to assist you (if needed) to work out the annual amounts. Please note approximate figures are good enough and in whole dollars only (no cents). Please note that not all items will be applicable to you so please ignore those ones. There are also some blank spaces at the end to add in items you may have that are not covered under the existing categories.

HOME	Comments / Notes	Weekly	Monthly	Quarterly	Annually (Total)
Mortgage / Rent					
Gas					
Electricity					
Insurance - Building					
Insurance - Contents					
Land Rates					
Water Rates					
Telephone / Mobile(s)					
Internet					
Foxtel / Netflix / Stan					
Total					

DAILY	Comments / Notes	Weekly	Monthly	Quarterly	Annually (Total)
Groceries					
Clothing / Accessories					
Grooming					
Subscriptions					
Takeaway / Restaurants					
Alcohol / Cigarettes					
Hobbies / Toys / Gaming					
Entertainment					
Total					



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MOTOR VEHICLES	Comments / Notes	Weekly	Monthly	Quarterly	Annually (Total)
Vehicle:					
Fuel					
Registration					
Insurance					
Repairs & Maintenance					
Vehicle:					
Fuel					
Registration					
Insurance					
Repairs & Maintenance					
Motorhome/Caravan/Trailer					
Fuel					
Registration					
Insurance					
Repairs & Maintenance					
Total					

INSURANCE / HEALTH	Comments / Notes	Weekly	Monthly	Quarterly	Annually (Total)
Income Protection					
TPD					
Life					
Pharmacy					
Dental					
Optical					
Private Health					
Sport					
Gym / Fitness					
Total					

OTHER	Comments / Notes	Weekly	Monthly	Quarterly	Annually (Total)
Education / Study					
Gifts					
Donations					
Total					

TOTAL