























**SaveMillions**

*Financial Record for the Month of*

Daily Expenses	Day 29	Day 30	Day 31	Total			
	/	/	/				
<b>Food:</b>							
Breakfast							
Lunch							
School Lunch							
Snacks							
Dinner							
Dessert							
Coffee/Juice/Sodas/Water							
Groceries							
<b>Transportation:</b>							
Gasoline							
Parking & Tolls							
Public Transit							
Auto Maintenance/Repairs							
Auto Registration/Tags/Taxes							
Car Wash							
<b>Entertainment:</b>							
Newspaper/Magazines							
Books							
Video/DVD Rentals							
CD/Video/DVD Purchases							
Hobbies/Sports							
Movies/Concerts/Plays							
Nightclubs/Bars							
Software/Games							
Other							
<b>Miscellaneous:</b>							
Cigarettes							
Alcohol							
Lottery Tickets							
Charitable Donations							
Church Tithes							
Internet Access							
Legal Fees							
Financial Services							



<b>Gifts:</b>	<b>Day 29</b>	<b>Day 30</b>	<b>Day 31</b>	<b>Total</b>			
Cards							
Birthday/Anniversary							
Wedding/Shower							
Special Person or Event							
Other							
<b>Utilities:</b>							
Gas							
Electric							
Water/Sewer							
Telephone							
Cell Phone/ Beeper							
Cable TV							
Other							
<b>Home:</b>							
Rent/Mortgage							
Second Mortgage							
Property Tax							
Association Dues							
Home Maintenance/Repairs							
Trash Collection							
Maid Service							
Furnishings							
Lawn Maintenance							
Pool Expenses							
Other							
<b>Savings:</b>							
Emergency Funds							
Retirement - 401(k)/403(b)							
Retirement - IRA							
Pension							
College Funds							
Stocks & Bonds							
Other Savings							
<b>Education:</b>							
Adult Tuition							
Lab Fees							
Books/Supplies							

Loans:	Day 29	Day 30	Day 31	Total			
Car Payment #1							
Car Payment #2							
Loan Payment #1							
Loan Payment #2							
Student Loan							
Credit Card Payment #1							
Credit Card Payment #2							
Credit Card Payment #3							
Credit Card Payment #4							
Other Payments							
<b>Insurance Premiums:</b>							
Medical Insurance							
Dental Insurance							
Optical Insurance							
Disability Insurance							
Life Insurance							
Automobile Insurance							
Home or Renters Insurance							
Property Insurance							
<b>Income Taxes:</b>							
Federal							
State							
Local							
Social Security (FICA)							
Medicare							
<b>Other:</b>							
Alimony Payments							
Vacation							
Other							
<b>Total Daily Expenses</b>							
<b>Total Spent to Date</b>							

Gross Income	Day 29	Day 30	Day 31	Total			
	/	/	/				
Salary - Adult #1							
Salary - Adult #2							
Commission/Bonus							
Alimony/Child Support							
Investment/Pension Income							
Miscellaneous Income							
<b>Total Income</b>							
<b>"The Monthly Results"</b>							
Net Monthly Income							
Monthly Expenses							
What's Left?							