

Household Zero-Based Budget Form

1. Household Information

Name

Budget Month

2. Income

Source	Expected Amount
E.g. Salary	
E.g. Freelance, Benefits	
Other	
Total Income	

3. Expenses

Category	Budgeted Amount
E.g. Rent/Mortgage	
Utilities	
Groceries	
Transportation	
Insurance	
Total Expenses	

Category	Budgeted Amount
Other	
Total Expenses	

4. Savings & Goals

Goal/Purpose	Amount to Save
Emergency Fund	
Retirement	
Short-term Goal	
Total Savings	

5. Zero-Based Budget Check

Income - Expenses - Savings =

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