## Expenses tracking sheet

- 1. Save all of your store receipts, bills, bank and credit card statements, loan statements, and any other records of payment.
- 2. Sort your spending into each category on the expenses tracking sheet and write down the amount of spending each week.
- 3. At the end of the month, total up each category. Then, add up your total spending for the month.
- **4.** To track your spending for several months, make a copy of this tracker.
- **5.** Even after you have created a budget, it is a good idea to track your spending every so often and see if there are opportunities to save money. Ask yourself if there are cheaper alternatives for each expense that still meet the values that are important to you. See *My values and money* worksheet.

## Spending for the month of

| Expense                              | Week 1                    | Week 2 | Week 3 | Week 4 | Week 5 | Total |  |  |
|--------------------------------------|---------------------------|--------|--------|--------|--------|-------|--|--|
| Housing expenses                     |                           |        |        |        |        |       |  |  |
| Rent/mortgage                        |                           |        |        |        |        |       |  |  |
| Utilities                            |                           |        |        |        |        |       |  |  |
| Home repairs and improvements        |                           |        |        |        |        |       |  |  |
| Other:                               |                           |        |        |        |        |       |  |  |
| Other:                               |                           |        |        |        |        |       |  |  |
| Other:                               |                           |        |        |        |        |       |  |  |
|                                      | Housing expenses subtotal |        |        |        |        |       |  |  |
| Living expenses                      |                           |        |        |        |        |       |  |  |
| Groceries                            |                           |        |        |        |        |       |  |  |
| Clothing and laundry                 |                           |        |        |        |        |       |  |  |
| Medical items and prescription drugs |                           |        |        |        |        |       |  |  |
| Childcare                            |                           |        |        |        |        |       |  |  |
| Other:                               |                           |        |        |        |        |       |  |  |
| Other:                               |                           |        |        |        |        |       |  |  |
| Other:                               |                           |        |        |        |        |       |  |  |
|                                      | Living expenses subtotal  |        |        |        |        |       |  |  |

| Expense                      | Week 1 | Week 2                       | Week 3                   | Week 4     | Week 5     | Total |  |  |
|------------------------------|--------|------------------------------|--------------------------|------------|------------|-------|--|--|
| Transportation expenses      |        |                              |                          |            |            |       |  |  |
| Public transit               |        |                              |                          |            |            |       |  |  |
| Car payments                 |        |                              |                          |            |            |       |  |  |
| Gas                          |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
|                              |        | Tra                          | nsportatio               | n expense  | s subtotal |       |  |  |
| Personal expenses            |        |                              |                          |            |            |       |  |  |
| Phone, TV, internet          |        |                              |                          |            |            |       |  |  |
| Eating out                   |        |                              |                          |            |            |       |  |  |
| Cigarettes and alcohol       |        |                              |                          |            |            |       |  |  |
| Personal grooming            |        |                              |                          |            |            |       |  |  |
| Recreation and entertainment |        |                              |                          |            |            |       |  |  |
| Gifts and donations          |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
|                              |        |                              | Persona                  | al expense | s subtotal |       |  |  |
| Savings                      |        |                              |                          |            |            |       |  |  |
| Emergency fund               |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
|                              |        |                              | Financial goals subtotal |            |            |       |  |  |
| Debt payments                |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
|                              |        |                              | Deb                      | t payment  | s subtotal |       |  |  |
| Other                        |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
| Other:                       |        |                              |                          |            |            |       |  |  |
|                              |        |                              | Othe                     | er expense | s subtotal |       |  |  |
|                              |        | Total spending for the month |                          |            |            |       |  |  |
| Clear the f                  |        | Save                         | Print                    |            |            |       |  |  |