

Diva's Budget Manual

Insurance & Savings...
done *P.i.n.k.*

*P*reparing *I*ndividuals with
*N*umbers & *K*nowledge



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The Little Details

INSTRUCTIONS

When filling out your budget, you need to make sure that we account for all small things that can creep up each month. This is so you are not surprised when the budget doesn't balance.

ALL EXPENSES:

Ensure that you put your "that's too much" number.

For example, if you usually spend \$200 a week on groceries, but you sometimes spend \$250, your budget should show \$250 weekly.

INCOME:

For your income, you are going to do the amount your pay cheque will never go under. Therefore, if you do overtime hours sometimes, use the lower amount.

Example: if you usually make \$750/week, but one week you work extra hours and make \$800, make sure you put the \$750 amount.

ANOTHER REALLY IMPORTANT THING:

We account for all expenses including vacations, gifts and clothing. Please ensure that you make this as an annual amount under "Frequency" column. Consider all gifts, not just Christmas, so birthdays, baby and wedding showers, all holidays and events you buy gifts for. This is very important and one that often gets missed.

DISCLAIMER

You use this BUDGET 100%, absolutely, altogether, completely, comprehensively, entirely, exhaustively, fully, thoroughly, totally, unconditionally, wholly and without omission at your own risk. You are responsible for your own personal finances and should not rely on this planner or anyone else to make the final decision for you. This MANUAL is merely a device that can help you to think and consider, but you are 100% responsible for any actions you take by using this MANUAL.

The information contained within this MANUAL from all writers is provided for informational purposes only and is not intended to substitute for obtaining professional financial advice. Please thoroughly research everything you read here and seek professional representation before acting on any information you may have found in this MANUAL and just in case none of the above is clear:

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BILL PAYMENT CHECKLIST

[illegible]

COMPLETE BUDGET - MASTER EXPENSE LIST - pg 1

Description	Day of Month Due	Frequency	\$ - per Month	His	Hers	Ours	Autopay?
FOOD AND SHELTER							
Groceries							
Mortgage/Rent							
Property Taxes							
Maintenance and Upkeep							
Home Insurance							
Utilities							
DEBT SERVICE							
Car Loans							
Consumer Loans							
Line(s) of Credit							
Retail Credit Cards							

COMPLETE BUDGET - MASTER EXPENSE LIST - pg 2

Description	Day of Month Due	Frequency	\$ - per Month	His	Hers	Ours	Autopay?
Retail Credit Cards cont'd							
Previous Year's Income Tax							
PERSONAL CARE							
Child Care							
Prescriptions							
Health & Dental							
Eye Care Product							
Clothing							
TRANSPORTATION							
Lease Payment							
Gas							
Insurance							
Repair & Maintenance							
Go Transit							
TTC/LTC							

COMPLETE BUDGET - MASTER EXPENSE LIST - pg 3

Description	Day of Month Due	Frequency	\$ - per Month	His	Hers	Ours	Autopay?
TRANSPORTATION CONT'D							
LEISURE AND DISCRETIONARY							
Phone							
Internet							
Television							
Entertainment							
Dining Out							
Vacations							
Children Activities							
Memberships							
Gifts							
Smoking							
Beer/Wine/Spirits							
Sports							
Hobbies							
Pet Care							
SAVINGS AND INVESTMENTS							
Employee Pension Plans							
RRSP Contributions							
TFSA Contributions							

COMPLETE BUDGET - MASTER EXPENSE LIST - pg 4

Description	Day of Month Due	Frequency	\$ - per Month	His	Hers	Ours	Autopay?
SAVINGS AND INVESTMENTS cont'd							
RESP Contributions							
RDSP Contributions							
Cash Accounts							
FINANCIAL SECURITY & INSURANCE							
Life Insurance							
Critical Illness Insurance							
Disability Insurance							
LTC Insurance							
Health and Dental							
Travel Insurance							
INCOME							
Income 1							
Income 2							
Income 3							
Total INCOME:							
Total EXPENSES:							
DIFFERENCE:							

ACCOUNT INFORMATION

Company:

Account/ Policy #		Username:	
Phone #:		Password:	
Notes:		Website:	

Company:

Account/ Policy #		Username:	
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Account/ Policy #		Username:	
Phone #:		Password:	
Notes:		Website:	

IRREGULAR EXPENSES

January

Date:	Description:	Amount

February

Date:	Description:	Amount

March

Date:	Description:	Amount

April

Date:	Description:	Amount

May

Date:	Description:	Amount

June

Date:	Description:	Amount

IRREGULAR EXPENSES

July

Date:	Description:	Amount

August

Date:	Description:	Amount

September

Date:	Description:	Amount

October

Date:	Description:	Amount

November

Date:	Description:	Amount

December

Date:	Description:	Amount

BI-WEEKLY BUDGET

Paycheque 1	Paycheque 2	Other Income	Total Income
Date:	Date:	Date:	
Amount:	Amount:	Amount:	

Week 1 Expenses

Date:						
Item						
Amount						
Item						
Amount						
Item						
Amount						
Total Week 1 Expenses:						

Week 2 Expenses

Date:						
Item						
Amount						
Item						
Amount						
Item						
Amount						
Total Week 2 Expenses:						

Income Remaining	
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BI-WEEKLY BUDGET

Paycheque 1	Paycheque 2	Other Income	Total Income
Date:	Date:	Date:	
Amount:	Amount:	Amount:	

Week 1 Expenses

Date:						
Item						
Amount						
Item						
Amount						
Item						
Amount						
Total Week 1 Expenses:						

Week 2 Expenses

Date:						
Item						
Amount						
Item						
Amount						
Item						
Amount						
Total Week 2 Expenses:						

Income Remaining

MONTHLY DUE ITEMS

MONTH:

Total Due:

	Item	Amount	Item	Amount	Item	Amount	Total
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
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21							
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26							
27							
28							
29							
30							
31							

MONTHLY DUE ITEMS

MONTH:

Total Due:

	Item	Amount	Item	Amount	Item	Amount	Total
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
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26							
27							
28							
29							
30							
31							

Goals and Planning

TRACKING & RESULTS

Financial Goals:

Savings Goals:

Current Results:

Savings:

Debt Re-paid:

Emergency Cash Available:

Starting Amount:

Used:

\$:

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Date:

--	--	--	--	--	--	--	--

SAVINGS GOALS TRACKER

Savings Goal:

Amount Needed:

SAVINGS GOALS TRACKER

Savings Goal:

Amount Needed:

SAVINGS GOALS TRACKER

Savings Goal:

Amount Needed:

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Amount Needed:

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Savings Goal:

Amount Needed:

SAVINGS GOALS TRACKER

Savings Goal:

Amount Needed:

DEBT REPAYMENT PLAN - SUMMARY

Total Starting Debt:

Total Companies:

DEBT TRACKER - By Company

Company:

Beginning Balance:

Minimum Payment:

Interest Rate:

DEBT TRACKER - By Company

Company:

Beginning Balance:

Minimum Payment:

Interest Rate:

DEBT TRACKER - By Company

Company:

Beginning Balance:

Minimum Payment:

Interest Rate:

DEBT TRACKER - By Company

Company:

Beginning Balance:

Minimum Payment:

Interest Rate:

DEBT TRACKER - By Company

Company:

Beginning Balance:

Minimum Payment:

Interest Rate:

DEBT TRACKER - By Company

Company:

Beginning Balance:

Minimum Payment:

Interest Rate: