

MONTHLY BILL PAYMENT SCHEDULE

Month: _____ Year: 20__

PAID	DUE DATE	DESCRIPTION / BILL NAME	CATEGORY	AMOUNT DUE	AUTO-PAY
	01	Rent / Mortgage	Housing	\$	[]
	05	Electric / Utility	Utilities	\$	[]
	08	Internet / Cable	Services	\$	[]
	12	Mobile Phone	Services	\$	[]
	15	Car Insurance	Insurance	\$	[]
	20	Credit Card Min.	Debt	\$	[]
	25	Streaming Subs.	Entertainment	\$	[]
				\$	[]
				\$	[]
				\$	[]

TOTAL MONTHLY BUDGET

\$

TOTAL PAID TO DATE

\$

REMAINING BALANCE

\$

NOTES