



Make a Budget Time/Money

Today's Date: _____ Print Your Name: _____ Your Signature: _____

Note: When making a budget, consider your family as being first in your life do not deprive them of your time or money. Make sure you have the time and money to accomplish what you are about to do.

What is your primary goal when making a budget for your time and money?

How much time will you budget for your family and those you love?

Budget: Day hrs. Week hrs. Month hrs.

Was your time budget fulfilled? Yes No

If your answer was No, please explain: What do you think you could do next time fulfill your time budget?

If your answer was Yes, What contributed you to reaching your budget?

How much time will you budget for your business?

Budget: Day hrs. Week hrs. Month hrs.

Was your time budget fulfilled? Yes No

If your answer was No, please explain: What do you think you could do next time to reach your time budget?

If your answer was Yes, What contributed to you reaching your budget?

What is your Monetary Budget for Living Expenses?

Wages:

Bills:

Money to put into Savings:

Available Money: Wages - (Bills + Savings)

Buffer for Unexpected Expenses: Available Money - Money for Business: Box A

What is your Monthly Budget for Your Business?

Opportunity Expenses:

Tools/Software/Training/Equipment:

Advertising/Marketing:

All Expenses: Opp Expenses + Tools/Software/Training + Advertising/Marketing

Money Available for Your Business: (Box A - Box B)

Disclaimer: The above is for informational purposes only and we accept no liability for any inaccuracies or errors.