

## Cash Flow Worksheet

Name \_\_\_\_\_ Date \_\_\_\_\_  
 (Please provide MONTHLY amounts)

INCOME	
Employment income 1	
Employment income 2	
Investment/rental income	
Social Security	
Annuity/pension	
Other:	
Other:	
<b>Total Income</b>	\$

FIXED EXPENSES	
Primary Home Mortgage/Rent	
Second Home(s) Mortgage	
Homeowner/Renter Insurance	
Primary Residence Taxes	
Other Real Estate Taxes	
HO/Association Dues	
Automobile/Boat Loans	
Automobile/Boat Insurance	
Automobile/Boat Registration	
Student Loans	
Personal & Other Secured Loans	
Credit Cards	
Umbrella Liability Insurance	
Professional Insurance	
Licensing/Professional Fees	
Life Insurance (Term)	
Life Insurance (Cash Value)	
Disability Insurance	
Medical/Dental Insurance	
Long-Term Care Insurance	
Income Taxes	
Social Sec./Medicare Taxes	
Other Taxes	
Savings (Regular)	
Investments (Regular)	
Retirement Plan Contributions	
Other Payroll Contributions	
Alimony/Child Support	
Child Day Care/Tuition	
Education Savings	
Other:	
Other:	
<b>Total Fixed Expenses</b>	\$

VARIABLE EXPENSES	
Utilities (Gas, Water, Elect.)	
Telephone	
Cell Phone	
Cable TV/Internet	
Primary Home Maintenance	
Grounds/Yard Maintenance	
Primary Home Improvements	
Other Real Estate Maintenance	
Automobile Fuel	
Automobile Maintenance	
Other Vehicle Fuel/Maint.	
Parking/Storage/Cleaning/Tolls	
Domestic Help	
Food	
Clothing	
Personal Care	
Subscriptions	
Pets	
Cleaning/Laundry	
Gifts	
Personal Education	
Professional Cont. Education	
Medical/Dental Expenses	
Medicine	
Child Allowance	
Child Activities	
Dining Out	
Entertainment	
Club/Association Dues	
Sports & Recreation	
Hobbies	
Vacation/Travel	
Charitable Donations	
Other:	
Other:	
Other:	
<b>Total Variable Expenses</b>	\$

NET CASH FLOW	
Total Income	\$
Total Expenses	\$
<b>Discretionary Income</b>	\$