

What Are Your Current Income Needs?

Cash Flow Worksheet

MONTHLY INCOME

| | |
|--|----------|
| Wages, Salaries & Tips | \$ _____ |
| Commission | \$ _____ |
| Bonus | \$ _____ |
| Interest Income (Savings Accounts, Bonds, CDs, etc.) | \$ _____ |
| Dividends (Stocks, Mutual Funds, etc.) | \$ _____ |
| Gifts Received (Inheritance, Trust Funds, etc.) | \$ _____ |
| Alimony and/or Child Support | \$ _____ |
| Pension(s) | \$ _____ |
| Social Security | \$ _____ |
| IRA Distributions | \$ _____ |
| Other | \$ _____ |

TOTAL MONTHLY INCOME

MONTHLY EXPENSES

| | | | |
|--|----------|---|----------|
| Mortgage/Rent | \$ _____ | Groceries | \$ _____ |
| Vacation Home Mortgage/HELOC | \$ _____ | Clothing/Laundry/Dry Cleaning | \$ _____ |
| Real Estate Tax(es) | \$ _____ | Education/Child Care | \$ _____ |
| Vehicle Loan(s) | \$ _____ | Entertainment/Dining Out | \$ _____ |
| Automotive Repairs/Gas | \$ _____ | Recreation/Travel | \$ _____ |
| Other Loans(s) | \$ _____ | Hobbies/Club Dues | \$ _____ |
| Credit Card(s) | \$ _____ | Personal Services (Hair, Nails, Barber, etc.) | \$ _____ |
| Federal Income Tax | \$ _____ | Homeowners Insurance | \$ _____ |
| State Income Tax | \$ _____ | Automotive Insurance | \$ _____ |
| Utilities (Electric, Gas, Water, Phone, Cable, Internet) | \$ _____ | Medical/Dental Insurance | \$ _____ |
| Household Repairs/Maintenance | \$ _____ | Life Insurance | \$ _____ |
| Major Household Repairs/Furnishings | \$ _____ | Disability/LTC Insurance | \$ _____ |
| Lawn/Garden | \$ _____ | Unreimbursed Medical/Dental Expenses | \$ _____ |
| Professional Services | \$ _____ | Other | \$ _____ |
| Charitable Contributions | \$ _____ | Other | \$ _____ |

TOTAL MONTHLY EXPENSES

NET CASH FLOW

| | |
|-------------------------------------|----------|
| TOTAL MONTHLY INCOME | \$ _____ |
| <i>minus</i> TOTAL MONTHLY EXPENSES | \$ _____ |
| DISCRETIONARY MONTHLY TOTAL | \$ _____ |