

CASH FLOW WORKSHEET

EXPENSES (Note: Monthly averages – Use your best estimate to distribute ATM draws)

HOUSING

Rent / Home Mortgage _____
Home Owners Association _____
Residence Property Taxes _____
Gas / Electric _____
Water / Garbage _____
Telephone / Cellular _____
Cable / Internet Access _____
Maintenance / Repair _____
Home Improvements _____
Furnishings _____
Groceries / Household Goods _____
Lawn Care / Housekeeper _____
Security System _____
Other Household Costs _____

TRANSPORTATION

Car Lease / Loan Payments _____
DMV Fees / License _____
Gasoline _____
Maintenance / Repairs _____
Parking / Buses / Taxis / Tolls _____

PERSONAL

Doctor Bills _____
Dental Bills _____
Optician / Glasses _____

Prescriptions _____
Health Club Membership _____
Haircuts / Beauty Salon _____
Clothing (Personal–Not Children) _____
Clothing (Work) _____
Laundry / Dry Cleaning _____
Gifts (Christmas, Birthday Other) _____
Charity (Church, Scouts, Etc.) _____
Veterinarian / Pet Expenses _____
Legal / Tax Prep Fees _____

KIDS / GRANDKIDS

Child Day Care _____
Babysitters _____
Children's Clothing _____
Children's Education _____
Children's Allowance _____
Children's Sports / Hobbies _____

LIABILITIES (NON-HOUSING / AUTO)

Credit Card Payments _____
Student Loan Payments _____
Other Loan Payments _____
Alimony _____
Child Support _____

CASH FLOW WORKSHEET

INSURANCE (PERSONAL/WORK)

Life _____
Disability _____
Long-Term Care _____
Auto Insurance _____
Home / Renter Insurance _____
Liability / Umbrella _____
Health / Dental / Medicare B _____

LEISURE

Lunch / Dinner Out _____
Entertainment _____
Yacht Club / Boat Expenses _____
Subscriptions / Books _____
Seminars / Self-Study / Courses _____
Recreation / Hobbies _____
Vacations (Regular / Holidays) _____

TAXES

Federal Withholding - Client _____
Federal Withholding - Spouse _____
State Withholding - Client _____
State Withholding - Spouse _____
Soc. Sec. / Medicare - Client _____
Soc. Sec. / Medicare - Spouse _____
Quarterly Estimated Federal _____
Quarterly Estimated State _____

SAVINGS/INVESTMENTS

Investment Savings _____
Client 401(k) / 403(b) _____
Spouse 401(k) / 403(b) _____
Client IRA _____
Spouse IRA _____

MISCELLANEOUS EXPENSES

(NOT IDENTIFIED ABOVE)

