SAVINGS & SPENDING PLAN

MONTHLY INCOME (including Savings*)			TOTAL = $		
Source					
Amount*	$	$	$	$	$	$

MONTHLY SPENDING		TOTAL = $	
Housing	Mortgage / Rent $	Property tax	$
	Repair / Maintenance $	HOA fee	$
	Home improvement $	Furnishings	$
Utilities	Water $	Gas / Electric / Solar	$
	Landscaping $	Trash / Recycling	$
	Cell phone $	Telephone	$
	Internet $	Satellite / Cable TV	$
Necessities	Food / Groceries $	Medical out-of-pocket	$
	Child care $	Education	$
Insurance	Life insurance $	Medical insurance	$
	Home/Renter insurance $	Vision/Dental insurance	$
	Vehicle insurance $	LTC insurance	$
	Disability insurance $	H.S.A. contribution	$
Transportation	Vehicle lease $	Fuel	$
	Tolls/Train/Bus $	Parking	$
	Vehicle maintenance $	DMV fees	$
Personal Expenses	Charitable donations $	Vacation / Travel	$
	Entertainment $	Hobbies	$
	Clothing $	Personal care	$
	Gifts $	Housekeeping	$
	Lessons / Sports $	Subscriptions	$
	Dining Out $	Memberships	$
	Alimony/Child Support $	Other	$
Consumer Debt	Type		
	Payment $	$	$	$
	Balance owed $	$	$	$

MONEY FLOW = (Monthly Income - Monthly Spending)	$

NOTES

*Amount: negative $ number is monthly savings amount. (e.g. $ -100 to save $100/month)