












MONTHLY CASH FLOW PLAN


Monthly Take Home Pay






CHARITY 	Budgeted	Spent
Tithes		
Charity & Offerings		


FOOD 	Budgeted	Spent
Groceries 		
Restaurants 		


SAVING 	Budgeted	Spent
Emergency Fund		
Retirement Fund		
College Fund		

CLOTHING 	Budgeted	Spent
Adults 		
Children 		
Cleaning/Laundry 		

HOUSING 	Budgeted	Spent
First Mortgage/Rent		
Second Mortgage		
Real Estate Taxes		
Repairs/Maintenance		
Association Dues		


 TRANSPORTATION	Budgeted	Spent
Gas 		
Repairs & Tires & Oil 		
License & Taxes 		
Car Replacement 		
Other		

 UTILITIES	Budgeted	Spent
Electricity		
Gas		
Water		
Trash		
Phone/Mobile		
Internet		
Cable/Satellite		




 MEDICAL/HEALTH	Budgeted	Spent
Medications		
Doctor Bills		
Dentist		
Optometrist		
Vitamins		
Other		
Other		

TOTALS FROM PAGE 1 *BUDGET* *SPENT*

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INSURANCE 	Budgeted	Spent
Life Insurance		
Health Insurance		
Homeowner/Renter		
Auto Insurance		
Disability Insurance		
Identity Theft		
Long-Term Care		

PERSONAL 	Budgeted	Spent
Child Care/Sitter 		
Toiletries 		
Cosmetics/Hair Care 		
Education/Tuition		
Books/Supplies		
Child Support		
Alimony		
Subscriptions		
Organization Dues		
Gifts/Holidays 		
Replace Furniture 		
Pocket Money (His) 		
Pocket Money (Hers) 		
Baby Supplies		
Pet Supplies 		
Music/Technology		
Miscellaneous		
Business Services		
Other		

RECREATION 	Budgeted	Spent
Entertainment 		
Vacation 		

DEBTS	Budgeted	Spent
Car Payment 1		
Car Payment 2		
Mortgage Balance		
2nd Mortgage/HELOC		
Credit Card 1		
Credit Card 2		
Credit Card 3		
Credit Card 4		
Credit Card 5		
Student Loan 1		
Student Loan 2		
Student Loan 3		
Student Loan 4		
Other Secured Debt		
Other		
Other		
Other		
Other		
Other		
Other		
Other		

	<i>BUDGET</i>	<i>SPENT</i>
TOTALS FROM PAGE 2		
MONTHLY TOTAL		

INCOME

AMOUNT BUDGETED

REMAINING TO BUDGET

