Cash Flow Instructions

Sheet #1 Cash Flow - Foundational

1) Enter each income source for monthly amount & annual will automatically populate
2) In savings section, enter monthly savings into retirement, investment and/or any unspent interest/investment income saved. Annual amount will automatically calculate, as will savings rate.
3) Enter in all social security monthly tax from paychecks and/or tax return. Annual amount will calculate.
4) Review prior year's tax returns to identify annual Federal and state income taxes paid. Enter in annual amount and monthly total will calculate automatically.
Enter each income source
5) Enter annual property tax payment and the monthly amount will calculate automatically.
6) Enter all insurance and monthly loan payments. Insurance sources can be from paycheck stubs or other sources of payments.

Sheet #2 Cash Flow Discretionary

1) Enter each expense source for monthly amount & annual will automatically populate.
2) Some categories may be zero for your family. It is ok to leave blank if not applicable for you.
3) Some categories have multiple sub categories. For example, other household could include things like snow
4) Calculation for "Total Discretionary" - add up totals for Household + Service & Personal Need + Food & Entertainment + Healthcare + Transportation + Family & Personal Expenses
5) Calculation for "Total Foundational Expenses + Savings" - from Foundational worksheet, add total of Foundational Expenses + Savings (bottom of page)
6) Enter "Total Income" from Foundational worksheet
7) Calculate "Surplus/Deficit Spending" - Enter Total Income and subtract "Foundational Expenses + Savings" total minus "Total Discretionary". If you have a negative number, you are creating debt and need to lessen expenses or increase income. If you have a positive number, congratualtions, you have extra money in your budget to save or spend towards your goals.

Sheet #3 Insurance Overview

1) The insurance worksheet is to have one place to account for all policies held and total cost in your budget. You can use the total cost calculated to use on the Foundational worksheet

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Cash Flow Statement

Income	Monthly	Annualized	Rate
Client #1 Income			
Client #2 Income			
Other Income (Bonus, Stock, Commission, etc)			
Investment/Bank Interest & Income			
Total Income			
Savings			
Client #1 Retirement Savings (401k, 403b, Roth)			
Client #2 Retirement Savings (401k, 403b, Roth)			
Educational Accounts			
HSA/FSA/DCRA Savings			
Other Savings			
Investment & Interest Reinvestment (Unspent)			
Total Savings			
Taxes			
Client #1 Social Security Tax			
Client #2 Social Security Tax			
State Income Tax			
Federal Income Tax			
Property Tax			
Total Taxes			
Debt/Loans			
Mortgage			
HELOC or 2nd Mortgage			
Credit Cards			
Auto Loan #1			
Auto Loan #2			
Other Loan/Debt			
Total Debt/Loans			
Insurance			
Medical/Eye/Dental Insurance Premiums			
FSA/HSA/DCRA Reimbursements			
Home/Auto/Umbrella Premiums			
Life Insurance Premiums			
Long-Term Disability Insurance Premiums			
Long-Term Care Insurance Premiums			
Other Insurance Coverage Premiums			
Total Insurance			
Total Savings			**(Enter from above)**
Total Foundational Expenses			**(Taxes+Debt+Insurance)**
Discretionary Spending Available			**(Income-Savings-Foundational)**

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Household	Monthly	Annualized	Rate
Water, Sewer, Electricity & Gas, Trash			
Internet/Cable/Streaming Services/Phone			
House Maintenance & Repair			
Asset Purchases (Furniture, Appliances, Etcetera)			
Other Household (includes HOA dues, services for home)			
Total Household Expenses			
Services & Personal Needs			
Child Care, Babysitting, Child Support			
Personal Care, Beauty & Toiletry Items			
Laundry, Dry Cleaning			
Other Services & Personal Needs			
Total Service & Personal Need Expenses			
Food & Entertainment			
Food, Groceries & Eating Out (include school meals)			
Entertainment & Club Memberships			
Vacation/Travel			
Sports, Hobbies & Lessons			
Extra-Curricular Family Activities			
Total Food & Entertainment Expenses			
Healthcare			
Doctor & Healthcare Out of Pocket			
Eye care and Glasses			
Dental & Orthodontics			
Chiropractor, Acupuncture, Massage & Mental Care			
Prescription Drugs			
Other Health Expenses & Gym Member Dues			
Total Healthcare Expenses			
Transportation			
Fuel, Tolls & Parking			
Repairs & Maintenance			
Total Transportation Expenses			
Other Family & Personal			
Books, Gifts, Holiday Expenses			
Charitable Donations			
Education, Tuition, Career Development & School Fees			
Spousal Support			
School or House Supplies			
Total Other Family & Personal Expenses			
Total Discretionary			***See calculations from instruction sheet**
Total Foundational Expenses + Savings			
Total Income (front)			
Surplus/Deficit Spending			

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