



Name: \_\_\_\_\_

Statement of Cash Flow Worksheet as of (mm/dd/yy): \_\_\_\_\_

Income		
	Monthly	Annually
Wages, salary, tips		
Dividends, interest		
Net business income		
Social Security income		
Pension, retirement		
Rents, royalties		
Other income		
<b>Total Monthly Income</b>		

Fixed Expenses		
	Monthly	Annually
Mortgage payment or rent		
2 <sup>nd</sup> home mortgage		
Auto loan		
Personal loans		
Credit cards		
Life insurance		
Disability insurance		
Medical insurance		
Long-term care insurance		
Homeowner's insurance		
Auto insurance		
Umbrella liability insurance		
Federal income taxes		
State income taxes		
FICA		
Real estate taxes		
Other taxes		
Savings (regularly)		
Investments (regularly)		
Retirement contributions		
<b>Total Fixed Expenses</b>		

Variable Expenses		
	Monthly	Annually
Electricity		
Gas		
Telephone		
Water		
Cable TV		
Home repairs and maintenance		
Home improvements		
Food		
Clothing		
Laundry		
Child care		
Personal care		
Auto gas & oil		
Auto repairs, etc.		
Other transportation		
Education expenses		
Entertainment/dining		
Recreation/travel		
Club/association dues		
Hobbies		
Gifts/donations		
Unreimbursed medical and dental expenses		
Miscellaneous		
<b>Total Variable Expenses</b>		

Net Cash Flow		
	Monthly	Annually
Total monthly income		
Total fixed expenses		
Total variable expenses		
<b>Discretionary Income (Income – Expenses)</b>		