

MONTHLY CASH FLOW WORKSHEET

Basic Living Expenses

Monthly Expense	\$Amount
Rent/Mortgage	
Electricity	
Heating Oil or Gas	
Water/Sewer	
Cable/Satellite	
Phone/Internet	
Cell Phone	
Gas for Car	
Car insurance payment	
Groceries	
Eating Out	
"Stuff" for household & personal care	
Clothing and Laundry	
Doctor co-pays	
Prescriptions	
Entertainment	
Hobbies/Habits	
Pets	
Gifts/Donations	
Other insurance	
Emergency Savings	
Other Savings	
TOTAL EXPENSES \$	
+ TOTAL MONTHLY DEBT PAYMENTS \$	
= TOTAL MONTHLY SPENDING \$	

Debts

Name of Creditor	Monthly Payment Requested	Total Amount Owed
Car Payment	\$ _____	\$ _____
Medical Bill		
Credit Card		
Past Due Utilities		
TOTAL DEBTS	\$ _____	\$ _____

TAKE HOME INCOME/PAYCHECKS

Income (1) \$ _____

Income (2) \$ _____

Income (3) \$ _____

Income (4) \$ _____

TOTAL MONTHLY NET (TAKE HOME) INCOME \$ _____

