

Monthly Cash Flow & Spending Plan

MONTH: _____

†Saving for non-monthly expense

PAY PERIOD (date, or
irregular income): _____

*Envelope system

Actually
Spent
(month)

ITEM

INCOME

CHARITABLE GIVING

*Tithing

*Offerings

Other Charity

SAVING

†Emergency Fund

†Retirement Fund

†College Fund

†Other

HOUSING

Mortgage

†Property Taxes

†Property insurance

†Repairs, Lawn care

†Replacement

Other

UTILITIES

Electricity

Water/Gas

Phone

Cell Phone

Internet

Trash

FOOD

*Grocery

*Restaurants

CLOTHING

*Children

*Adults

*Cleaning/Laundry

Subtotal (expenses)

TRANSPORTATION	Monthly Cash Flow & Spending Plan				Actual
Car Payment	_____	_____	_____	_____	_____
*Gas & Oil	_____	_____	_____	_____	_____
†Repairs	_____	_____	_____	_____	_____
†Car Insurance	_____	_____	_____	_____	_____
†License & Taxes	_____	_____	_____	_____	_____
†Car Replacement	_____	_____	_____	_____	_____
MEDICAL/HEALTH					
Health insurance	_____	_____	_____	_____	_____
†Doctor/Dentist	_____	_____	_____	_____	_____
Prescriptions	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____
PERSONAL					
†Life Insurance	_____	_____	_____	_____	_____
Child Care	_____	_____	_____	_____	_____
*Toiletries/Cosmetic	_____	_____	_____	_____	_____
*Hair Care	_____	_____	_____	_____	_____
†Education	_____	_____	_____	_____	_____
†School Supplies/Tuition	_____	_____	_____	_____	_____
Child Support/Alimony	_____	_____	_____	_____	_____
Subscriptions	_____	_____	_____	_____	_____
Organization Dues	_____	_____	_____	_____	_____
†Gifts (incl. Christmas)	_____	_____	_____	_____	_____
Miscellaneous	_____	_____	_____	_____	_____
*Blow Money	_____	_____	_____	_____	_____
RECREATION					
*Entertainment	_____	_____	_____	_____	_____
†Vacation	_____	_____	_____	_____	_____
DEBTS (Hopefully -0-)					
Credit Card 1	_____	_____	_____	_____	_____
Credit Card 2	_____	_____	_____	_____	_____
Student Loan	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____
Subtotal (expenses)	_____	_____	_____	_____	_____
Subtotal from page 1	_____	_____	_____	_____	_____
Total (100% of income)	_____	_____	_____	_____	_____