

## Monthly Cash Flow

	Week 1	Week 2	Week 3	Week 4	Week 5	Month Total
Savings/investing	_____	_____	_____	_____	_____	_____
Federal & state taxes	_____	_____	_____	_____	_____	_____
Mortgage or rent	_____	_____	_____	_____	_____	_____
Home repair/maintenance	_____	_____	_____	_____	_____	_____
Property taxes	_____	_____	_____	_____	_____	_____
Life/disability insurance	_____	_____	_____	_____	_____	_____
Home/renter's insurance	_____	_____	_____	_____	_____	_____
Auto insurance	_____	_____	_____	_____	_____	_____
Credit card/loan paymt.	_____	_____	_____	_____	_____	_____
Utilities & telephone	_____	_____	_____	_____	_____	_____
Food (incl. eating out)	_____	_____	_____	_____	_____	_____
Clothing	_____	_____	_____	_____	_____	_____
Grooming	_____	_____	_____	_____	_____	_____
Gasoline	_____	_____	_____	_____	_____	_____
Auto repair/maintenance	_____	_____	_____	_____	_____	_____
Other transportation	_____	_____	_____	_____	_____	_____
Medical care	_____	_____	_____	_____	_____	_____
Education	_____	_____	_____	_____	_____	_____
Child care	_____	_____	_____	_____	_____	_____
Alimony/child support	_____	_____	_____	_____	_____	_____
Entertainment	_____	_____	_____	_____	_____	_____
Vacations	_____	_____	_____	_____	_____	_____
Gifts/charitable contrib.	_____	_____	_____	_____	_____	_____
Laundry/cleaning	_____	_____	_____	_____	_____	_____
<b>(a) Total Expenses</b>	_____	_____	_____	_____	_____	_____
<b>(b) Income</b>	_____	_____	_____	_____	_____	_____
<b>(c) Cash Balance (b) - (a)</b>	_____	_____	_____	_____	_____	_____