

Income

Record your annual income below, and put a star * next to items that you cannot count on receiving again in the future.

Category		My Gross Annual Income		My Take-Home Annual Income
Salary from		\$	_	\$
Salary from	(secona job)	\$	_	\$
Commissions		_\$	_	\$
Bonuses		\$	_	\$
Royalties		\$	_	\$
Interest		\$	_	\$
Dividends		\$	_	\$
Loan(s) Repaid to Me		\$	_	\$
Rent(s) Paid to Me		\$	_	\$
Gifts		\$	_	\$
I Social Security		\$	_	\$
Other (specify)		\$	_	\$
Other (specify)		\$	_	\$
	Sub-Total	<u>\$</u>		<u>\$</u>
	Subtract Items * Starred	\$		<u>\$</u>
	Total Annual Income	\$		\$



Expenses

CASH FLOW WORKSHEET - EXPENSES					
EXPENSE ITEM	MONTHLY	ANNUAL			
Rent	\$	\$			
Mortgage	\$ \$ \$ \$	\$			
Co-op Maintenance/Condo Common Charges	\$	\$			
Property Tax Homeowner Insurance	<u>\$</u>	\$ \$			
Other: Furniture, Appliances, Housekeeping, Home Repair	\$	\$			
Sub-total	*\$	ຶ\$			
Income Tax - Federal	\$	\$			
Income Tax - State & Local	\$	\$			
Utilities (Electricity, Gas, Cable TV)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$			
Telephone	\$	\$			
Food	\$	\$			
Clothing	\$	\$			
Medical & Pharmacy	\$	\$			
Personal Care (Haircuts, etc.)	\$	\$			
Continuing & Adult Education Children's Education	<u>\$</u>	\$ \$			
Transportation	\$	\$			
Recreation & Entertainment	\$	\$			
Hobbies	\$	\$			
Vacations	\$	\$			
Gifts	\$	\$			
Charitable Contributions	\$	\$			
Other: Club Memberships, Personal Spending Money,					
Child's Allowance. Etc.	\$	\$			
Sub-total	\$	\$			



Expenses (continued)

Insurance: Health, Hospital, Medical, Den Insurance: Disability Insurance: Life Insurance: Property & Casualty (Liability, Insurance: Automobile Loans		\$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Savings Emergency Savings Retirement Contributions Investments Miscellaneous	Sub-total	\$ \$ \$ \$ \$	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Add All Sub-totals Add 10% TOTAL EXPENSES	\$ \$ \$	\$ \$ \$