

MONTHLY CASH FLOW PLAN for _____

	EARNER	SOURCE OF INCOME	AVERAGE MONTHLY	WEEK #1	WEEK #2	WEEK #3	WEEK #4
INCOME	_____	_____	_____				
	_____	_____	_____				
	_____	_____	_____				
Total INCOME							
EXPENSES							
DATE DUE	<u>GIVING</u>	_____	_____				
		_____	_____				
		_____	_____				
	<u>INVESTMENTS</u>	_____	_____				
		_____	_____				
		_____	_____				
	<u>SAVINGS</u>	_____	_____				
		_____	_____				
		_____	_____				
	<u>HOUSING</u>	MORTGAGE/RENT	_____				
		TAXES	_____				
		INSURANCE	_____				
		ELECTRIC	_____				
		HEAT	_____				
		PHONE	_____				
		CELL PHONE	_____				
		TRASH	_____				
		Cable/Satellite	_____				
		INTERNET	_____				
		HOME REPAIRS	_____				
		REPLACE FURNITURE	_____				
	<u>AUTOMOTIVE</u>	GAS	_____				
		INSURANCE	_____				
		LICENSE/TAXES	_____				
		REPAIRS/MAINT.	_____				
		REPLACE CAR	_____				
	<u>Household</u>	Food	_____				
		Household	_____				
		DINING OUT	_____				
		SCHOOL LUNCH	_____				
	<u>Clothing</u>	Adults	_____				
		Children	_____				