

# Monthly Cash Flow Plan

Cash flows in and out each month. Make sure you tell it where to go!

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## Yes, this budget form has a lot of lines and blanks.

But that's okay. We do that so we can list practically every expense imaginable on this form to prevent you from forgetting something. Don't expect to put something on every line. Just use the ones that are relevant to your specific situation.

### Step 1

Enter your monthly **Nett Income** (this is the money you take home after tax) in the box at the top right (A). This is the amount you have for the month to budget. So far so good, huh?

A

Monthly Income Nett	<input type="text"/>
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### Step 2

Within each main category, such as Food, there are subcategories, like Groceries. Start at the top and work your way down, filling out the Budgeted column (B) first. Add up each subcategory and put that number in the Total box (C).

Also, pay attention to Dave's recommended percentages (D). This will help you keep from budgeting too much for a category.

B

C

D

FOOD		Spent	Budgeted
Groceries			
Restaurants			
		*5-15%	TOTAL

### Step 3

Finally, enter your **Nett Income** (take-home pay) in the top box at the end of the page (E), then add up all categories and place that total in the Category Totals box (F). Then subtract your Category Totals amount from your **Nett Income**/Take-home pay. You should have a zero balance (G). Doesn't that feel great?

E

F

G

TAKE-HOME PAY
CATEGORY TOTALS
ZERO BALANCE

### Step 4

When the month ends, put what you actually spent in the Spent column (H). That will help you make any necessary adjustments to the next month's budget.

H

FOOD		Spent	Budgeted
Groceries			
Restaurants			
		*5-15%	TOTAL

# Monthly Cash Flow Plan

Cash flows in and out each month. Make sure you tell it where to go!

Monthly Take-Home Pay

Add up budgeted column  
and enter here

These icons represent good options for cash envelopes

## ♥ CHARITY

Spent Budgeted

Tithes

\_\_\_\_\_

Charity & Offerings

\_\_\_\_\_

\*10-15%

TOTAL

## 🏠 SAVING

Spent Budgeted

Emergency

\_\_\_\_\_

Fund Retirement

\_\_\_\_\_

Fund Education

\_\_\_\_\_

\*10-15%

TOTAL

## 🏠 HOUSING

Spent Budgeted

Mortgage/Rent

\_\_\_\_\_

Second Mortgage

\_\_\_\_\_

Rates RE Costs

\_\_\_\_\_

Repairs/Maint.

\_\_\_\_\_

Strata/ Other fees

\_\_\_\_\_

\*25-35%

TOTAL

## ⚙️ UTILITIES

Spent Budgeted

Electricity

\_\_\_\_\_

Gas

\_\_\_\_\_

Water

\_\_\_\_\_

Rubbish

\_\_\_\_\_

Phone/Mobile

\_\_\_\_\_

Internet

\_\_\_\_\_

Subscriptions

\_\_\_\_\_

\*5-10%

TOTAL

## 🍏 FOOD

Spent Budgeted



Groceries

\_\_\_\_\_



Restaurants

\_\_\_\_\_

\*5-15%

TOTAL

## 👕 CLOTHING

Spent Budgeted



Adults

\_\_\_\_\_



Children

\_\_\_\_\_



Cleaning/Laundry

\_\_\_\_\_

\*2-7%

TOTAL

## 🚗 TRANSPORTATION

Spent Budgeted

Fuel & Oil

\_\_\_\_\_



Repairs & Tires

\_\_\_\_\_

License & Taxes

\_\_\_\_\_

Car Replacement

\_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

\*10-15%

TOTAL

## 🏥 MEDICAL/HEALTH

Spent Budgeted

Medications

\_\_\_\_\_

Doctor Bills

\_\_\_\_\_

Dentist

\_\_\_\_\_

Optometrist

\_\_\_\_\_

Vitamins /Natural

\_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

\*5-10%

TOTAL

\*Dave's Recommended Percentages



## INSURANCE

Spent

Budgeted

Life Insurance

Health Insurance

Homeowner/Renter

Auto Insurance

Disability Insurance

Identity Theft

Long-Term Care

\*10-25%

TOTAL



## PERSONAL

Spent

Budgeted



Child Care/Sitter



Toiletries



Cosmetics/Hair Care

Education/Tuition

Books/Supplies

Child Support

Alimony

Subscriptions

Organization Dues

Gifts (inc. Christmas)



Replace Furniture



Pocket Money (His)



Pocket Money (Hers)

Baby Supplies

Pet Supplies

Music/Technology

Miscellaneous

Other

Other

\*5-10%

TOTAL



## RECREATION

Spent

Budgeted



Entertainment

Vacation

\*5-10%

TOTAL



## DEBTS

Spent

Budgeted

Car Payment 1

Car Payment 2

Credit Card 1

Credit Card 2

Credit Card 3

Credit Card 4

Credit Card 5

Personal Loan 1

Personal Lona 2

HECS Debt

Other

Other

Other

Other

Other

Other

Your goal is 0%

\*5-10%

TOTAL

Once you have completed filling out each category, subtract all category totals from your take-home pay.

Use the "income sources" form if necessary

TAKE-HOME PAY

Add up totals from each category

CATEGORY TOTALS

Remember — The goal of a zero-based budget is to get this number to zero

ZERO BALANCE