

NAME

DATE

Some items are paid quarterly or annually. For purposes of this schedule please convert them to a monthly basis (e.g. - quarterly insurance payment of \$300 to show as \$100 per month).

MONTHLY IN	
Compensation	
Compensation	
Compensation	
Investment Income	
Net Rental Income	
IRA / Pension / 401(k) Income	
Life Insurance	
Cash from Business Ventures	
Alimony	
Social Security	
Gains / Losses from Sales	
Unemployment Income	
Other	
Other	
Other	
Other	

MONTHLY OUT	
Tithing to the Lord	
Income Taxes	
Mortgage / Rent, Personal Residence	
Utilities	
Groceries	
Clothing	
Auto Loan / Lease	
Auto Costs (Repairs, Gas, Oil, Insur, Etc.)	
Health Insurance	
Doctors & Prescriptions	
Child Care	
Child Support / Alimony / Garnishments	
Insurance	
To Emergency Fund (\$1,000)	
To Savings (3 to 6 months cushion)	
Entertainment	
Other Loans (with Collateral)	
Other Loans (without Collateral)	
Other Charitable Giving	
Other Costs	

MONTHLY TOTAL IN	
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MONTHLY TOTAL OUT	
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NET MONTHLY	
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