

MONTHLY CASH FLOW ANALYSIS

Name(s): _____

Date: _____

Gross Income: \$ _____

Deduct Priority Expenses:

A. Giving (tithes, offerings & alms) \$ _____

B. Taxes (from payroll records) \$ _____

C. Debt (total of monthly payments) \$ _____

Total Priority Expenses: (-) (\$ _____)

NET SPENDABLE INCOME: (Gross income less A, B, & C =) \$ _____

MONTHLY LIVING EXPENSES

A. Housing \$ _____

B. Food \$ _____

C. Clothing \$ _____

D. Transportation \$ _____

E. Entertainment/recreation \$ _____

F. Medical \$ _____

G. Insurance \$ _____

H. Children \$ _____

I. Gifts \$ _____

J. Miscellaneous \$ _____

TOTAL MONTHLY LIVING EXPENSES: (\$ _____)

MONTHLY CASH FLOW MARGIN: \$ _____

(Net Spendable Income minus total (A-J) Living Expenses)

Commitments for Monthly Positive Cash Flow Margin:

A. Savings \$ _____

B. Retirement \$ _____

C. Extra Debt Payment \$ _____

D. Additional Giving \$ _____

Total Commitments for Positive Cash Flow: (\$ _____)

Uncommitted Monthly Cash Flow Margin: \$ _____

Comments (What will you change?):