## **Monthly Cash Flow Plan**

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

#### 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 take-home pay in the box at the top right (**A**). This is the amount you have for the month to budget. So far so good, huh?

### 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**).

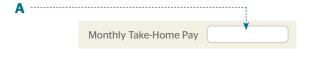
Also, pay attention to Dave's recommended percentages (**D**). This will help you keep from budgeting too much for a category.

#### Step 3

Finally, enter your 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 Take-Home Pay. You should have a zero balance (**G**). Doesn't that feel great?

#### 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.









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

		Monthly Take-Home Pa	ay
	Add up budgeted column \$ enter here	These icons represent good options	for cash envelopes
• CHARITY	Spent A Budgeted	<b>Ý FOOD</b>	Spent Budgeted
Tithes Charity & Offerings		Groceries	
	*10-15% TOTAL		*5-15% <b>TOTAL</b>
# SAVING	Spent Budgeted	T CLOTHING	Spent Budgeted
Emergency Fund Retirement Fund College Fund		<ul> <li>☑ Adults</li> <li>☑ Children</li> <li>☑ Cleaning/Laundry</li> </ul>	
	*10-15% <b>TOTAL</b>		*2-7% <b>TOTAL</b>
	Spent Budgeted	<b>TRANSPORTATION</b>	Spent Budgeted
First Mortgage/Rent Second Mortgage Real Estate Taxes Repairs/Maint. Association Dues		Gas & Oil	
	*25-35% <b>TOTAL</b>		*10-15% <b>TOTAL</b>
✿, UTILITIES	Spent Budgeted	ର୍ଭ MEDICAL/HEALTH	Spent Budgeted
Electricity Gas Water Trash Phone/Mobile Internet Cable		Medications Doctor Bills Dentist Optometrist Vitamins Other Other	
	*5-10% TOTAL		*5-10% TOTAL
			*Dave's Recommended Percentages

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	Spent Budgeted
Life Insurance	
Health Insurance	
Homeowner/Renter	
Auto Insurance	
Disability Insurance	
Identity Theft	
Long-Term Care	
	*10-25% <b>TOTAL</b>
PERSONAL	Spent Budgeted
🗭 Child Care/Sitter	
Toiletries	
🔗 Cosmetics/Hair Care	2
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	

ኇ፟	RECREATION	Spent	Budgeted
Ø	Entertainment Vacation		
		*5-10%	TOTAL
R	DEBTS	Spent	Budgeted
	Car Payment 1 Car Payment 2 Credit Card 1 Credit Card 2 Credit Card 3 Credit Card 4 Credit Card 5 Student Loan 1 Student Loan 2 Student Loan 3 Student Loan 4 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

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