

MONTHLY CASH FLOW WORKSHEET

This is step one in our free financial reality check. The not so simple question: where's all your money going every month? So many of us don't even want to know the answer. Have no fear! Filling this out helps us see what you're working with. It also helps you see your big financial picture. Knowing is half the battle and now you've got a war buddy.

» **Step 2:** [CLICK HERE](#) to get a copy of your credit report.



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ASSETS		
	DESCRIPTION	VALUE
CHECKING ACCOUNTS		
SAVINGS ACCOUNTS		
401(k)/PENSION ACCOUNTS		
INVESTMENT ACCOUNTS		
SAVINGS BONDS		
STOCKS/BONDS		
VEHICLE		
VEHICLE		
PROPERTY		
PROPERTY		
OTHER		
TOTAL		\$

MONTHLY INCOME	
DESCRIPTION	NET (TAKE HOME)
EMPLOYER:	
EMPLOYER:	
OTHER:	
OTHER:	
TOTAL	\$

MONTHLY BILLS AND EXPENSES			
	MONTHLY PAYMENT/ EXPENSE	OUTSTANDING BALANCE	PAST DUE? (CHECK IF YES)
MORTGAGE / RENT			<input type="checkbox"/>
VEHICLE LOANS			<input type="checkbox"/>
OTHER LOAN			<input type="checkbox"/>
HOME EQUITY			<input type="checkbox"/>
CREDIT CARD 1			<input type="checkbox"/>
CREDIT CARD 2			<input type="checkbox"/>
CREDIT CARD 3			<input type="checkbox"/>
UTILITIES (ELECTRIC, WATER, GAS)			<input type="checkbox"/>
PHONE (CELL + LAND)			<input type="checkbox"/>
CABLE/SATELLITE			<input type="checkbox"/>
CAR INSURANCE			<input type="checkbox"/>
LIFE INSURANCE			<input type="checkbox"/>
GROCERIES			<input type="checkbox"/>
CLOTHING ALLOWANCE			<input type="checkbox"/>
GASOLINE			<input type="checkbox"/>
ENTERTAINMENT			<input type="checkbox"/>
MEALS OUT			<input type="checkbox"/>
MEDICAL EXPENSES			<input type="checkbox"/>
PRESCRIPTIONS			<input type="checkbox"/>
CHILD CARE			<input type="checkbox"/>
CHILD SUPPORT			<input type="checkbox"/>
EDUCATION - TUITION			<input type="checkbox"/>
DUES: GYM, CLUB, ETC.			<input type="checkbox"/>
CHARITABLE DONATIONS			<input type="checkbox"/>
MISCELLANEOUS			<input type="checkbox"/>
SAVINGS			<input type="checkbox"/>
RETIREMENT CONTRIBUTIONS			<input type="checkbox"/>
LEGAL (COLLECTIONS, GARNISHMENT, LAWSUIT)			<input type="checkbox"/>
OTHER:			<input type="checkbox"/>
OTHER:			<input type="checkbox"/>
TOTAL	\$	\$	

GRAND TOTAL	TOTAL MONTHLY PAYMENTS	TOTAL OUTSTANDING BALANCES
	\$	\$

MONTHLY OVERAGE OR SHORTAGE	TOTAL NET MONTHLY INCOME	\$
	TOTAL MONTHLY PAYMENTS	- \$
	OVERAGE OR SHORTAGE	= \$