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 Pay |
|---------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Add up budgeted column \$ enter here | These icons represent good options for cash envelopes |
| • CHARITY | Spent 🔺 Budgeted | FOOD Spent Budgeted |
| Tithes | | Groceries |
| Charity & Offerings | / | Restaurants |
| | *10-15% TOTAL | *5-15% TOTAL |
| 🖝 SAVING | Spent Budgeted | The second secon |
| Emergency Fund | | Adults |
| Retirement Fund | | 🖂 Children |
| College Fund | | Cleaning/Laundry |
| | *10-15% TOTAL | *2-7% TOTAL |
| | Spent Budgeted | TRANSPORTATION Spent Budgeted |
| First Mortgage/Rent | | Gas & Oil |
| Second Mortgage | | 📨 Repairs & Tires |
| Real Estate Taxes | | License & Taxes |
| Repairs/Maint. | | Car Replacement |
| Association Dues | | Other |
| | *25-35% TOTAL | *10-15% TOTAL |
| ✿, UTILITIES | Spent Budgeted | MEDICAL/HEALTH Spent Budgeted |
| Electricity | | Medications |
| Gas | | Doctor Bills |
| Water | | Dentist |
| Trash | | Optometrist |
| Phone/Mobile | | Vitamins |
| Internet | | Other |
| Cable | | Other |
| | *5-10% TOTAL | *5-10% TOTAL *Dave's Recommended Percentage |

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| Life Insurance Health Insurance Homeowner/Renter Auto Insurance Disability Insurance Identity Theft Long-Term Care | |
|--------------------------------------------------------------------------------------------------------------------------------------|-----|
| Homeowner/Renter Auto Insurance Disability Insurance Identity Theft Long-Term Care | |
| Auto Insurance Disability Insurance Identity Theft Long-Term Care | |
| Disability Insurance Identity Theft Long-Term Care | |
| Identity Theft Long-Term Care | |
| Long-Term Care | |
| - | |
| *10-25% | |
| | AL |
| PERSONAL Spent Budge | ted |
| 🔗 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% TOT | |

| ጽ | 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 | | |
| | 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 |