

# **FAMILY CASH FLOW RECORD**

## **TOOLS FOR YOUR FAMILY'S FINANCIAL MANAGEMENT**

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# WHERE DOES YOUR MONEY COME FROM???

The first step to take in organizing one's financial affairs is to determine what are the sources of income. Most of us earn a wage or salary, but many also have some other sources of income. Examples might include stock dividends or partnership payouts or rent from income properties.

For purposes of evaluating cash flows, only consider actual receipts. Only include that which actually brings current cash into your coffers.

You may very well have income that doesn't enter your bank account currently and for cash flow purposes should not be included. For example, if you receive stock dividend checks and deposit them into a bank account, they would be included for cash flow purposes, but if those same dividends were instead automatically reinvested in more stock, then they would not be considered for current cash flow. Granted you'll be paying income taxes on those dividends, but they do not add to your spendable income.

## INSTRUCTIONS

**GROSS SALARY/WAGES** – Your paycheck stubs should provide the information necessary to determine your gross monthly salary or wages, your total deductions and your net salary, i.e., what's left over after the deductions.

**OTHER INCOME** – If you have other income that is actually received, enter the amounts where appropriate and sum them up to determine the Total Other Income received in any month. Extraordinary Income is unusual, non-recurring income, like an inheritance or lottery winnings.

**DEDUCTIONS FROM OTHER INCOME** – Unfortunately, unlike your paychecks, these other receipts do not usually have any taxes already taken out, so some evaluation of that tax liability must be made.

If you have gotten these receipts and paid tax on them before, you probably have an idea what those amounts would be. If not, then you can deduct a percentage amount equivalent to your federal income tax bracket rate plus your state income tax percentage.

Now total these deductions and deduct them from the Total Other Income to determine the Net Other Income. Note that there are some tax-free investments such as some municipal bonds that might generate periodic interest payments which would be tax free and should be excluded from deduction calculations.

**TOTAL NET RECEIPTS** - This is the amount that you actually have available to pay your monthly expenses, save and invest.

NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY COME FROM?

**RECEIPTS**

JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
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<b>GROSS SALARY/WAGES</b>					
<b>- DEDUCTIONS</b>					
- Federal Income Tax Withholding					
- Social Security Tax Withholding					
- Medicare Tax Withholding					
- State Income Tax Withholding					
- 401(k)/SEP Deduction					
- Health Insurance Deduction					
- Other _____					
- Other _____					
<b>NET SALARY WAGES</b>					
<b>OTHER INCOME</b>					
S Corporation/Partnership Distributions					
Dividend Income					
Interest Income					
Rental Income					
Social Security Income					
IRA Distributions					
Payments Rec'd for Loans You've Made					
Proceeds from Loans You've Taken Out					
Proceeds from Sale of any Assets					
Extraordinary Income					
Other _____					
Other _____					
<b>TOTAL OTHER INCOME</b>					
<b>DEDUCTIONS FROM OTHER INCOME</b>					
- Estimated Federal Income Tax Payments					
- Estimated State Income Tax Payments					
- Prior Year Federal Income Tax Payments					
- Prior Year State Income Tax Payments					
- Social Security/Medicare Tax Payments					
- Other _____					
- Other _____					
<b>- TOTAL DEDUCTIONS - OTHER INCOME</b>					
<b>NET OTHER INCOME</b>					
<b>TOTAL NET RECEIPTS</b>					

NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY COME FROM?

**RECEIPTS**

JUL 20____	AUG 20____	SEP 20____	OCT 20____	NOV 20____	DEC 20____	TOTALS
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<b>GROSS SALARY/WAGES</b>							
<b>- DEDUCTIONS</b>							
- Federal Income Tax Withholding							
- Social Security Tax Withholding							
- Medicare Tax Withholding							
- State Income Tax Withholding							
- 401(k)/SEP Deduction							
- Health Insurance Deduction							
- Other _____							
- Other _____							
<b>NET SALARY WAGES</b>							
<b>OTHER INCOME</b>							
S Corporation/Partnership Distributions							
Dividend Income							
Interest Income							
Rental Income							
Social Security Income							
IRA Distributions							
Payments Rec'd for Loans You've Made							
Proceeds from Loans You've Taken Out							
Proceeds from Sale of any Assets							
Extraordinary Income							
Other _____							
Other _____							
<b>TOTAL OTHER INCOME</b>							
<b>DEDUCTIONS FROM OTHER INCOME</b>							
- Estimated Federal Income Tax Payments							
- Estimated State Income Tax Payments							
- Prior Year Federal Income Tax Payments							
- Prior Year State Income Tax Payments							
- Social Security/Medicare Tax Payments							
- Other _____							
- Other _____							
<b>- TOTAL DEDUCTIONS - OTHER INCOME</b>							
<b>NET OTHER INCOME</b>							
<b>TOTAL NET RECEIPTS</b>							

## **WHERE DOES ALL THE MONEY GO????**

For most of us, it seems as though everything that comes in goes right back out. And when it's gone most of us aren't sure where it all really went. Does this sound right to you?

The next step in organizing one's financial affairs is to figure out where all the money goes. We all know how much our rent or mortgage payment is and maybe even how much our utilities run, but after that, it usually gets a bit more vague. To really get a handle on where the money goes, an in depth analysis must be done.

Once you have categorized your total expenditures, you will not only have determined where the money went, but you will be able to calculate "The Bottom Line". By deducting your Total Disbursements from your Total Net Receipts, you'll be able to see what's left over for saving and investing.

In fact, perhaps you'll discover your disbursements are greater than your receipts. That's a cause for action!

As a result of this exercise, you'll have a clear record to examine for possible savings, you'll be better able to budget for future expenses and you'll have a realistic starting point for future financial planning.

This process takes some effort, but it's worthwhile because you are laying the groundwork for a secure future!

# DISBURSEMENTS INSTRUCTIONS

## **PRIMARY RESIDENCE -**

**Mortgage Principle and Interest** amounts will be found on your monthly mortgage bills, as will those monthly amounts collected for **Homeowners Insurance** and **Real Estate Tax** escrows. If you pay those directly yourself, the record should be in your checkbook register.

**Maintenance/Repairs** would include any amounts you spend for home repairs like painting, etc.

**Home Improvements** on the other hand, are significant investments that increase the worth of your home, such as a new roof or a new addition.

**Home Equity Line Payments** are the total amount of any payments you are making on a Home Equity Loan and are included in this section since they affect the value of your home, regardless of what the money is used for. The proceeds of a home equity loan should have been included in the Other Income section.

**PRIMARY HOUSEHOLD EXPENSES** – These would include all of your normal home operating expenses such as utilities, telephone and internet, landscape care and so on.

**SECONDARY RESIDENCE/INVESTMENT PROPERTIES & SECONDARY HOUSEHOLD EXPENSES** - are the disbursements made to support additional properties other than your main residence, and are all similar to those of the primary residence.

**AUTO/BOAT/RV EXPENSES** – are all of those cash outflows associated with ownership of any of these items.

**CREDIT CARD PURCHASES** - **Hopefully, this section will have no entries other than possibly any credit card interest or fees paid!** There are Credit Card Payment Allocation Worksheets on pages 10A - 12B for your use in allocating these payments into the appropriate expense categories. Each Expenditure Category Section has a line for entering credit card payment distributions from the Credit Card Payment Allocation worksheet.

If you don't allocate your credit card payments, you'll only know where your money went (i.e. the credit card company), but not what the categories of expenses were .

**IMPORTANT!** PLEASE DO NOT DISTRIBUTE YOUR CREDIT CARD PAYMENTS TO THEIR APPROPRIATE EXPENSE CATEGORIES AND THEN ALSO ENTER THE TOTAL AMOUNT INTO MONTHLY CREDIT CARD BILLS PAID! That would result in double counting those expenses.

**ALL THOSE OTHER CATEGORIES** – In general, the information for allocating your spending into these other categories will be found in vendors' and lenders' monthly bills, tax authority billings, bank and credit card statements and your checkbook register.

**PLEASE NOTE:** Expenses that are not paid monthly do not need to be divided into monthly figures! For expenditures made quarterly, on other periods, or randomly, just enter total amounts paid in the month they are paid.

NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY GO?

**MONTHLY CASH FLOWS**

JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
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**DISURSEMENTS**

**PRIMARY RESIDENCE**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Rent						
Mortgage ( <i>Principle &amp; Interest only</i> )						
Homeowners Insurance						
Real Estate Taxes						
Maintenance/Repairs						
Maintenance/Repairs Paid By Credit Card						
Home Improvements						
Home Improvements Paid By Credit Card						
Home Equity Line Payments						
Other _____						
Other _____						
<b>TOTAL PRIMARY RESIDENCE</b>						

**PRIMARY HOUSEHOLD EXPENSES**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Alarm Monitoring						
Cable/Satellite Television						
Cellular						
Electricity						
Gas/Oil						
Lawn/Landscape Care						
Membership Fees						
Newspaper						
Online/Internet Service						
Refuse Service						
Telephone						
Water & Sewer						
Other _____						
Other _____						
Household Expenses Paid By Credit Card						
<b>TOTAL HOUSEHOLD EXPENSES</b>						

**SECONDARY RESIDENCE/INVESTMENT PROPERTIES**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Mortgage ( <i>Principle &amp; Interest only</i> )						
Homeowners Insurance						
Real Estate Taxes						
Maintenance/Repairs						
Maintenance/Repairs Paid By Credit Card						
Home Improvements						
Home Improvements Paid By Credit Card						
Management Fees						
Other _____						
Other _____						
<b>TOTAL SECOND/INVESTMENT PROPERTY</b>						

**SUBTOTALS PAGE 5A**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
<b>SUBTOTALS PAGE 5A</b>						

NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY GO?

**MONTHLY CASH FLOWS**

JUL 20____	AUG 20____	SEP 20____	OCT 20____	NOV 20____	DEC 20____	TOTALS
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**DISURSEMENTS**

**PRIMARY RESIDENCE**

Rent							
Mortgage ( <i>Principle &amp; Interest only</i> )							
Homeowners Insurance							
Real Estate Taxes							
Maintenance/Repairs							
Maintenance/Repairs Paid By Credit Card							
Home Improvements							
Home Improvements Paid By Credit Card							
Home Equity Line Payments							
Other _____							
Other _____							
<b>TOTAL PRIMARY RESIDENCE</b>							

**PRIMARY HOUSEHOLD EXPENSES**

Alarm Monitoring							
Cable/Satellite Television							
Cellular							
Electricity							
Gas/Oil							
Lawn Care							
Membership Fees							
Newspaper							
Online/Internet Service							
Refuse Service							
Telephone							
Water & Sewer							
Other _____							
Other _____							
Household Expenses Paid By Credit Card							
<b>TOTAL HOUSEHOLD EXPENSES</b>							

**SECONDARY RESIDENCE/INVESTMENT PROPERTIES**

Mortgage							
Home Owners Insurance							
Real Estate Taxes							
Maintenance/Repairs							
Maintenance/Repairs Paid By Credit Card							
Capital Improvements							
Home Improvements Paid By Credit Card							
Management Fees							
Other _____							
Other _____							
<b>TOTAL SECOND/INVESTMENT PROPERTY</b>							

**SUBTOTALS PAGE 5B**

<b>SUBTOTALS PAGE 5B</b>							
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NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY GO?

**MONTHLY CASH FLOWS**

JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
---------------	---------------	---------------	---------------	---------------	---------------

**DISURSEMENTS**

**SECONDARY HOUSEHOLD EXPENSES**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Alarm Monitoring						
Cable/Satellite Television						
Cellular						
Electricity						
Gas/Oil						
Lawn/Landscape Care						
Membership Fees						
Newspaper						
Online/Internet Service						
Refuse Service						
Telephone						
Water & Sewer						
Other _____						
Other _____						
Household Expenses Paid By Credit Card						
<b>TOTAL SECOND HOUSEHOLD EXPENSES</b>						

**AUTOMOBILE/BOAT/RV EXPENSE**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Auto Loan _____						
Auto Loan _____						
Auto Loan _____						
Boat Loan						
RV Loan						
Gasoline						
Maintenance & Repairs						
Personal Property Taxes						
Other _____						
Other _____						
Auto/Boat/RV Exp. Paid By Credit Card						
<b>TOTAL AUTO/BOAT/RV EXPENSES</b>						

**CREDIT CARD PURCHASES** *(If you ARE distributing payments, your only entries here would be for interest or fees)*

*(If you are NOT distributing payments, use the total monthly billing amount, not the amount you paid)*

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Credit Card # 1						
Credit Card #1 Interest/Fees						
Credit Card # 2						
Credit Card #2 Interest/Fees						
Credit Card # 3						
Credit Card #3 Interest/Fees						
Credit Card # 4						
Credit Card #4 Interest/Fees						
Credit Card # 5						
Credit Card #5 Interest/Fees						
Credit Card # 6						
Credit Card #6 Interest/Fees						
<b>TOTAL CREDIT CARD PURCHASES</b>						

<b>SUBTOTALS PAGE 6A</b>						
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NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY GO?

**MONTHLY CASH FLOWS**

JUL	AUG	SEP	OCT	NOV	DEC	TOTALS
20_____	20_____	20_____	20_____	20_____	20_____	

**DISURSEMENTS**

**SECONDARY HOUSEHOLD EXPENSES**

	JUL	AUG	SEP	OCT	NOV	DEC	TOTALS
Alarm Monitoring							
Cable/Satellite Television							
Cellular							
Electricity							
Gas/Oil							
Lawn Care							
Membership Fees							
Newspaper							
Online/Internet Service							
Refuse Service							
Telephone							
Water & Sewer							
Other _____							
Other _____							
Household Expenses Paid By Credit Card							
<b>TOTAL SECOND HOUSEHOLD EXPENSES</b>							

**AUTOMOBILE/BOAT/RV EXPENSE**

	JUL	AUG	SEP	OCT	NOV	DEC	TOTALS
Auto Loan _____							
Auto Loan _____							
Auto Loan _____							
Boat Loan							
RV Loan							
Gasoline							
Maintenance & Repairs							
Personal Property Taxes							
Other _____							
Other _____							
Auto/Boat/RV Exp. Paid By Credit Card							
<b>TOTAL AUTO/BOAT/RV EXPENSES</b>							

**CREDIT CARD PURCHASES** *(If you ARE distributing payments, your only entries here would be for interest or fees)*

*(If you are NOT distributing payments, use the total monthly billing amount, not the amount you paid)*

	JUL	AUG	SEP	OCT	NOV	DEC	TOTALS
Credit Card # 1							
Credit Card #1 Interest/Fees							
Credit Card # 2							
Credit Card #2 Interest/Fees							
Credit Card # 3							
Credit Card #3 Interest/Fees							
Credit Card # 4							
Credit Card #4 Interest/Fees							
Credit Card # 5							
Credit Card #5 Interest/Fees							
Credit Card # 6							
Credit Card #6 Interest/Fees							
<b>TOTAL CREDIT CARD PURCHASES</b>							

<b>SUBTOTALS PAGE 6B</b>							
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NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY GO?

**MONTHLY CASH FLOWS**

JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
---------------	---------------	---------------	---------------	---------------	---------------

**DISBURSEMENTS**

**LOAN PAYMENTS**

Other Loan _____					
Other Loan _____					
Other Loan _____					
Other Loan _____					
<b>TOTAL LOAN PAYMENTS</b>					

**EDUCATION**

Tuition					
Books					
Room & Board					
Fees					
Miscellaneous					
Other _____					
Education Expenses Paid By Credit Card					
<b>TOTAL EDUCATION EXPENSES</b>					

**FOOD**

Groceries					
Dining Out					
Food Expenses Paid By Credit Card					
<b>TOTAL FOOD EXPENSES</b>					

**FURNITURE & FURNISHINGS**

Appliances					
Carpet/Draperies					
Electronics					
Furniture					
Other _____					
Other _____					
Furniture/Furnishings Paid By Credit Card					
<b>TOTAL FURNITURE &amp; FURNISHINGS</b>					

**INSURANCE PREMIUMS**

Accident					
Automobile					
Boat					
Dental					
Disability					
Errors & Omissions					
Flood					
Health/Medical					
Life					
Long Term Care					
Umbrella Liability					
Other _____					
Insurance Expense Paid By Credit Card					
<b>TOTAL INSURANCE EXPENSE</b>					

<b>SUBTOTALS PAGE 7A</b>					
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NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY GO?

**MONTHLY CASH FLOWS**

	JUL	AUG	SEP	OCT	NOV	DEC	TOTALS
	20____	20____	20____	20____	20____	20____	

**DISURSEMENTS**

**LOAN PAYMENTS**

Other Loan _____							
Other Loan _____							
Other Loan _____							
Other Loan _____							
<b>TOTAL LOAN PAYMENTS</b>							

**EDUCATION**

Tuition							
Books							
Room & Board							
Fees							
Miscellaneous							
Other _____							
Education Expenses Paid By Credit Card							
<b>TOTAL EDUCATION EXPENSES</b>							

**FOOD**

Groceries							
Dining Out							
Food Expenses Paid By Credit Card							
<b>TOTAL FOOD EXPENSES</b>							

**FURNITURE & FURNISHINGS**

Appliances							
Carpet/Draperies							
Electronics							
Furniture							
Other _____							
Other _____							
Furniture/Furnishings Paid By Credit Card							
<b>TOTAL FURNITURE &amp; FURNISHINGS</b>							

**INSURANCE PREMIUMS**

Accident							
Automobile							
Boat							
Dental							
Disability							
Errors & Omissions							
Flood							
Health/Medical							
Life							
Long Term Care							
Umbrella Liability							
Other _____							
Insurance Expense Paid By Credit Card							
<b>TOTAL INSURANCE EXPENSE</b>							

<b>SUBTOTALS PAGE 7B</b>							
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NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY GO?

**MONTHLY CASH FLOWS**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
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**DISBURSEMENTS**

**MEDICAL COSTS OUT-OF-POCKET**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Dental						
Eyecare						
Physician						
Hospital						
Prescriptions						
Other _____						
Other _____						
Medical Expenses Paid By Credit Card						
<b>TOTAL MEDICAL EXPENSES</b>						

**OTHER EXPENDITURES**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Accounting/Legal/Professional Fees						
Charitable Donations						
Christmas/Holiday/Birthday Gifts						
Clothing						
Dependent Care						
Gifts to Others						
Liesure/Recreation						
Miscellaneous						
Personal Care						
Pet Care						
Vacation						
Other _____						
Other _____						
Other Expenses Paid By Credit Card						
<b>TOTAL OTHER EXPENDITURES</b>						

**INVESTING/SAVINGS**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
401(k) Plan <i>(If not Payroll Deduction)</i>						
IRA Plan <i>(If not Payroll Deduction)</i>						
529(b)/ College Savings Plan						
Emergency Fund						
Other _____						
Other _____						

**NON-RECURRING EXPENDITURES**

	JAN 20____	FEB 20____	MAR 20____	APR 20____	MAY 20____	JUN 20____
Other _____						
Other _____						
Other _____						
Non-recurring Expense Paid By Credit Card						
<b>TOTAL NON-RECURRING EXPENSES</b>						

**SUBTOTALS PAGE 8A**

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**TOTAL DISBURSEMENTS**

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**AVAILABLE CASH DIFFERENCE**

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NAME \_\_\_\_\_

## WHERE DOES YOUR MONEY GO?

**MONTHLY CASH FLOWS**

	JUL	AUG	SEP	OCT	NOV	DEC	TOTALS
	20_____	20_____	20_____	20_____	20_____	20_____	

**DISBURSEMENTS**

**MEDICAL COSTS OUT-OF-POCKET**

Dental							
Eyecare							
Physician							
Hospital							
Prescriptions							
Other _____							
Other _____							
Medical Expenses Paid By Credit Card							
<b>TOTAL MEDICAL EXPENSES</b>							

**OTHER EXPENDITURES**

Accounting/Legal/Professional Fees							
Charitable Donations							
Christmas/Holiday/Birthday Gifts							
Clothing							
Dependent Care							
Gifts to Others							
Liesure/Recreation							
Miscellaneous							
Personal Care							
Pet Care							
Vacation							
Other _____							
Other _____							
Other Expenses Paid By Credit Card							
<b>TOTAL OTHER EXPENDITURES</b>							

**INVESTING/SAVINGS**

401(k) Plan <i>(If not Payroll Deduction)</i>							
IRA Plan <i>(If not Payroll Deduction)</i>							
529(b)/ College Savings Plan							
Emergency Fund							
Other _____							
Other _____							

**NON-RECURRING EXPENDITURES**

Other _____							
Other _____							
Other _____							
Non-recurring Expense Paid By Credit Card							
<b>TOTAL NON-RECURRING EXPENSES</b>							

**SUBTOTALS PAGE 8B**

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**TOTAL DISBURSEMENTS**

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**AVAILABLE CASH DIFFERENCE**

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# CREDIT CARD PAYMENT ALLOCATION WORKSHEETS

Many of us use the convenience of credit cards for our purchases. You must allocate those payments into their proper expense categories if you really want to know where your money is going. Most credit card bills list the components of the billing, usually by purchase occurrence and vendor.

When you are making your credit card payments, it is easy to identify each category of expenditure that the various charges represent. Once you have distributed the expenses, those totals can be transferred to the appropriate "Paid by Credit Card" line on the Disbursement Worksheet. If you do this, you will be more accurately tracking your cash outflows.

After allocating the expenses into their appropriate categories, the only thing left over on your billing statement would be any credit card interest or fees. These amounts should be entered into the Credit Card section of the Disbursement Worksheet on pages 6A and 6B.

Just to remind you again, once the expenses are allocated by category, you should not enter the amounts of the credit card billing or the amounts of the credit card payments on the Disbursement Worksheet. You do not want to enter in the expenses twice.

It really doesn't take too much effort to distribute the credit card expenditures into the appropriate categories. Unless your credit card purchases are really minimal, it is highly recommended that you **do** allocate the expenses.

Another benefit of using this worksheet is that you'll also see whether or not you are making any headway on paying off those credit card balances, and you'll see how much they are costing you when you don't !

NAME \_\_\_\_\_

**MONTHLY CREDIT CARD PAYMENT ALLOCATION FOR 20\_\_\_\_\_**

**DO NOT  
DOUBLE  
COUNT!**

-----> TRANSFER TO APPROPRIATE CATEGORIES ON PAGES 5A TO 8B!

**CREDIT CARD #1**

**CREDIT CARD NAME** \_\_\_\_\_

	JAN	FEB	MAR	APR	MAY	JUN
PREVIOUS UNPAID BALANCE						
Primary Residence Home Improvement						
Primary Residence Maint & Repair						
Primary Residence Household Expense						
Secondary Residence Home Improvement						
Secondary Residence Maint & Repair						
Secondary Residence Household Expense						
Automobile Boat RV Expense						
Education Expense						
Food Expense						
Furniture & Furnishings Expense						
Insurance Expense						
Medical Expense						
Other Expense						
Non-Recurring Expense						
Credit Card Interest and Fees						
<b>TOTAL MONTHLY CREDIT CARD BILLING</b>						
<b>LESS: MONTHLY PAYMENT MADE</b>						
<b>CURRENT UNPAID CREDIT CARD BALANCE</b>						

**CREDIT CARD #2**

**CREDIT CARD NAME** \_\_\_\_\_

	JAN	FEB	MAR	APR	MAY	JUN
PREVIOUS UNPAID BALANCE						
Primary Residence Home Improvement						
Primary Residence Maint & Repair						
Primary Residence Household Expense						
Secondary Residence Home Improvement						
Secondary Residence Maint & Repair						
Secondary Residence Household Expense						
Automobile Boat RV Expense						
Education Expense						
Food Expense						
Furniture & Furnishings Expense						
Insurance Expense						
Medical Expense						
Other Expense						
Non-Recurring Expense						
Credit Card Interest and Fees						
<b>TOTAL MONTHLY CREDIT CARD BILLING</b>						
<b>LESS: MONTHLY PAYMENT MADE</b>						
<b>CURRENT UNPAID CREDIT CARD BALANCE</b>						

NAME \_\_\_\_\_

**MONTHLY CREDIT CARD PAYMENT ALLOCATION FOR 20\_\_\_\_\_**

**DO NOT  
DOUBLE  
COUNT!**

-----> TRANSFER TO APPROPRIATE CATEGORIES ON PAGES 5A TO 8B!

**CREDIT CARD #1**

**CREDIT CARD NAME \_\_\_\_\_**

	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
PREVIOUS UNPAID BALANCE							
Primary Residence Home Improvement							
Primary Residence Maint & Repair							
Primary Residence Household Expense							
Secondary Residence Home Improvement							
Secondary Residence Maint & Repair							
Secondary Residence Household Expense							
Automobile Boat RV Expense							
Education Expense							
Food Expense							
Furniture & Furnishings Expense							
Insurance Expense							
Medical Expense							
Other Expense							
Non-Recurring Expense							
Credit Card Interest and Fees							
<b>TOTAL MONTHLY CREDIT CARD BILLING</b>							
<b>LESS: MONTHLY PAYMENT MADE</b>							
<b>CURRENT UNPAID CREDIT CARD BALANCE</b>							

**CREDIT CARD #2**

**CREDIT CARD NAME \_\_\_\_\_**

	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
PREVIOUS UNPAID BALANCE							
Primary Residence Home Improvement							
Primary Residence Maint & Repair							
Primary Residence Household Expense							
Secondary Residence Home Improvement							
Secondary Residence Maint & Repair							
Secondary Residence Household Expense							
Automobile Boat RV Expense							
Education Expense							
Food Expense							
Furniture & Furnishings Expense							
Insurance Expense							
Medical Expense							
Other Expense							
Non-Recurring Expense							
Credit Card Interest and Fees							
<b>TOTAL MONTHLY CREDIT CARD BILLING</b>							
<b>LESS: MONTHLY PAYMENT MADE</b>							
<b>CURRENT UNPAID CREDIT CARD BALANCE</b>							



NAME \_\_\_\_\_

**MONTHLY CREDIT CARD PAYMENT ALLOCATION FOR 20\_\_\_\_\_**

**DO NOT  
DOUBLE  
COUNT!**

-----> TRANSFER TO APPROPRIATE CATEGORIES ON PAGES 5A TO 8B!

**CREDIT CARD #3**

**CREDIT CARD NAME** \_\_\_\_\_

	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
PREVIOUS UNPAID BALANCE							
Primary Residence Home Improvement							
Primary Residence Maint & Repair							
Primary Residence Household Expense							
Secondary Residence Home Improvement							
Secondary Residence Maint & Repair							
Secondary Residence Household Expense							
Automobile Boat RV Expense							
Education Expense							
Food Expense							
Furniture & Furnishings Expense							
Insurance Expense							
Medical Expense							
Other Expense							
Non-Recurring Expense							
Credit Card Interest and Fees							
<b>TOTAL MONTHLY CREDIT CARD BILLING</b>							
<b>LESS: MONTHLY PAYMENT MADE</b>							
<b>CURRENT UNPAID CREDIT CARD BALANCE</b>							

**CREDIT CARD #4**

**CREDIT CARD NAME** \_\_\_\_\_

	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
PREVIOUS UNPAID BALANCE							
Primary Residence Home Improvement							
Primary Residence Maint & Repair							
Primary Residence Household Expense							
Secondary Residence Home Improvement							
Secondary Residence Maint & Repair							
Secondary Residence Household Expense							
Automobile Boat RV Expense							
Education Expense							
Food Expense							
Furniture & Furnishings Expense							
Insurance Expense							
Medical Expense							
Other Expense							
Non-Recurring Expense							
Credit Card Interest and Fees							
<b>TOTAL MONTHLY CREDIT CARD BILLING</b>							
<b>LESS: MONTHLY PAYMENT MADE</b>							
<b>CURRENT UNPAID CREDIT CARD BALANCE</b>							



NAME \_\_\_\_\_

**MONTHLY CREDIT CARD PAYMENT ALLOCATION FOR 20\_\_\_\_\_**

**DO NOT  
DOUBLE  
COUNT!**

-----> TRANSFER TO APPROPRIATE CATEGORIES ON PAGES 5A TO 8B!

**CREDIT CARD #5**

**CREDIT CARD NAME** \_\_\_\_\_

	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
PREVIOUS UNPAID BALANCE							
Primary Residence Home Improvement							
Primary Residence Maint & Repair							
Primary Residence Household Expense							
Secondary Residence Home Improvement							
Secondary Residence Maint & Repair							
Secondary Residence Household Expense							
Automobile Boat RV Expense							
Education Expense							
Food Expense							
Furniture & Furnishings Expense							
Insurance Expense							
Medical Expense							
Other Expense							
Non-Recurring Expense							
Credit Card Interest and Fees							
<b>TOTAL MONTHLY CREDIT CARD BILLING</b>							
<b>LESS: MONTHLY PAYMENT MADE</b>							
<b>CURRENT UNPAID CREDIT CARD BALANCE</b>							

**CREDIT CARD #6**

**CREDIT CARD NAME** \_\_\_\_\_

	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
PREVIOUS UNPAID BALANCE							
Primary Residence Home Improvement							
Primary Residence Maint & Repair							
Primary Residence Household Expense							
Secondary Residence Home Improvement							
Secondary Residence Maint & Repair							
Secondary Residence Household Expense							
Automobile Boat RV Expense							
Education Expense							
Food Expense							
Furniture & Furnishings Expense							
Insurance Expense							
Medical Expense							
Other Expense							
Non-Recurring Expense							
Credit Card Interest and Fees							
<b>TOTAL MONTHLY CREDIT CARD BILLING</b>							
<b>LESS: MONTHLY PAYMENT MADE</b>							
<b>CURRENT UNPAID CREDIT CARD BALANCE</b>							