

Date ___/___/___



We're There When Life Happens...

SNAPSHOT OF YOUR PRESENT BUDGET

I. FIXED EXPENSES

- 1. Rent or Mortgage \$ _____
- 2. Public Service \$ _____
- 3. Water, Trash & Sewer \$ _____
- 4. Telephone \$ _____
- 5. Auto Insurance \$ _____
- 6. Life Insurance \$ _____
- 7. Health Insurance \$ _____
- 8. Other Insurance \$ _____
- 9. Other Fixed Expenses \$ _____
- SUBTOTAL \$ _____**

II. VARIABLE EXPENSES

- 1. Grocery Store \$ _____
- 2. Work Lunches \$ _____
- 3. Clothing \$ _____
- 4. Dry Cleaning \$ _____
- 5. Auto, Gas, Repairs, etc. \$ _____
- 6. Doctor & Medications \$ _____
- 7. Dentist \$ _____
- 8. Home Repairs \$ _____
- 9. Child Care \$ _____
- 10. Other Variable Expenses \$ _____
- SUBTOTAL \$ _____**

III. MISCELLANEOUS EXPENSES

- 1. Entertainment \$ _____
 - Restaurants \$ _____
 - Books and Mags \$ _____
 - Hobbies \$ _____
 - Amusements \$ _____
 - Club Dues \$ _____
 - Other \$ _____
- 2. Church & Charities \$ _____
- 3. Education \$ _____
- 4. Gifts-Xmas, birthday, etc \$ _____
- 5. Vacations \$ _____
- 6. Savings \$ _____
- 7. Investments \$ _____
- 8. IRA & Keogh \$ _____
- 9. Other Misc. Expenses \$ _____
- SUBTOTAL \$ _____**

IV. DEBT SERVICE

- 1. Total Non-Mortgage Consumer Loan Payments \$ _____
- SUBTOTAL \$ _____**

SUMMARY OF EXPENSES

- SUBTOTALS :**
- I. FIXED \$ _____
- II. VARIABLE \$ _____
- III. MISC. \$ _____
- IV. DEBT SERVICE \$ _____
- TOTAL MONTHLY EXPENSE: \$ _____**

SOURCES OF ANNUAL INCOME

- Social Security Income** \$ _____
- Your earnings** \$ _____
(# of pay periods _____)
- Spouse's earnings** \$ _____
(# of pay periods _____)
- Rental** \$ _____
(# of payments _____)
- Dividends** \$ _____
(# of payments _____)
- Interest** \$ _____
(# of payments _____)

TOTAL MONTHLY INCOME: \$ _____
X 12 months

= ANNUAL INCOME \$ _____

Let us help you, your family and friends:

- Organize Existing Assets IRA and 401(k) rollovers College Savings
- Life, Disability Protection Long Term Care

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