

Cash Flow Worksheet

Sources of cash

Please enter all sources of cash—including taxable wages, salaries, bonus and other taxable and tax-free income—whether it is received in cash or reported for tax purposes only. For tax planning purposes, each spouse should enter their income sources separately.

Values entered are Monthly ____ Annual ____ Date: _____

	Spouse 1 name		Spouse 2 name	
	Amount	Expected growth or decline	Amount	Expected growth or decline
Wages and salary	\$ _____	% _____	\$ _____	% _____
Bonus	\$ _____	% _____	\$ _____	% _____
Net self-employment	\$ _____	% _____	\$ _____	% _____
Consulting income	\$ _____	% _____	\$ _____	% _____
Deferred comp.	\$ _____	% _____	\$ _____	% _____
Social security	\$ _____	% _____	\$ _____	% _____
Retirement/pension	\$ _____	% _____	\$ _____	% _____
Child support	\$ _____	% _____	\$ _____	% _____
Alimony	\$ _____	% _____	\$ _____	% _____
Rental income (net)	\$ _____	% _____	\$ _____	% _____
Trust income	\$ _____	% _____	\$ _____	% _____
Gifts/inheritances	\$ _____	% _____	\$ _____	% _____
Other taxable sources of cash	\$ _____	% _____	\$ _____	% _____
_____	\$ _____	% _____	\$ _____	% _____
Other tax-free sources of cash	\$ _____	% _____	\$ _____	% _____
_____	\$ _____	% _____	\$ _____	% _____

Reliance on Information Provided: Summit shall rely upon information provided by you, and will not verify the accuracy of any such information. Accordingly, in the event that any such information provided is inaccurate or incomplete, the corresponding results or recommendations will be inaccurate or incomplete. It remains your responsibility to notify Summit of any changes in the information provided.

CASH FLOW WORKSHEET

Uses of cash

Please use this section to identify and summarize information regarding your deductible and non-deductible expenses. Major expenses, like children’s education and car purchases, should be entered on page 4. *Note: We will assume these expenses will increase with inflation in all cash flow projections, unless you specify otherwise.*

Values entered are Monthly ____ Annual ____

Both spouses combined	Amount	Comments
IRA contributions	\$ _____	_____
SEP contributions	\$ _____	_____
401(k) contributions	\$ _____	_____
403(b) contributions	\$ _____	_____
Home mortgage payments	\$ _____	_____
Home equity line payments	\$ _____	_____
Alimony paid	\$ _____	_____
Medical insurance premium	\$ _____	_____
Medical/dental expenses	\$ _____	_____
Charitable contributions (cash)	\$ _____	_____
Charitable contributions (other)	\$ _____	_____
Real estate taxes	\$ _____	_____
Personal property taxes	\$ _____	_____
Employee expenses paid by you	\$ _____	_____
Professional dues paid by you	\$ _____	_____
Accountant fees	\$ _____	_____
Attorney fees	\$ _____	_____
Other deductible expenses	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

Reliance on Information Provided: Summit shall rely upon information provided by you, and will not verify the accuracy of any such information. Accordingly, in the event that any such information provided is inaccurate or incomplete, the corresponding results or recommendations will be inaccurate or incomplete. It remains your responsibility to notify Summit of any changes in the information provided.

CASH FLOW WORKSHEET

Uses of cash continued

Values entered are Monthly ____ Annual ____

Both spouses combined	Amount	Comments
Nondeductible loan payments	\$ _____	_____
Child support paid	\$ _____	_____
Lease payments	\$ _____	_____
Food, groceries	\$ _____	_____
Clothing	\$ _____	_____
Entertainment	\$ _____	_____
Vacations	\$ _____	_____
Gifts, celebrations	\$ _____	_____
Transportation (<i>auto expenses</i>)	\$ _____	_____
Life insurance premiums	\$ _____	_____
Disability insurance premiums	\$ _____	_____
Homeowners insurance premium	\$ _____	_____
Auto insurance premium	\$ _____	_____
Umbrella insurance premium	\$ _____	_____
Long-term care insurance premium	\$ _____	_____
Other insurance premiums	\$ _____	_____
Rent	\$ _____	_____
Repair, maintenance	\$ _____	_____
Lawn care, landscaping	\$ _____	_____
Utilities (<i>phone, electric, water, etc.</i>)	\$ _____	_____
Household furnishings	\$ _____	_____
Other supplies	\$ _____	_____
Other nondeductible expenses	\$ _____	_____

Reliance on Information Provided: Summit shall rely upon information provided by you, and will not verify the accuracy of any such information. Accordingly, in the event that any such information provided is inaccurate or incomplete, the corresponding results or recommendations will be inaccurate or incomplete. It remains your responsibility to notify Summit of any changes in the information provided.

CASH FLOW WORKSHEET

Major expenses

Children’s education funding needs

(Indicate annual costs in today’s dollars—only the amounts you intend to pay)

Child’s name	_____	_____	_____	_____
Date school begins	____/____	____/____	____/____	____/____
# years to attend	_____	_____	_____	_____
Tuition	\$ _____	\$ _____	\$ _____	\$ _____
Books and supplies	\$ _____	\$ _____	\$ _____	\$ _____
Room and board	\$ _____	\$ _____	\$ _____	\$ _____
Personal expenses	\$ _____	\$ _____	\$ _____	\$ _____

Other expenses

Car at age _____	\$ _____	\$ _____	\$ _____	\$ _____
Private school from age _____ to age _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____

Other major financial events

Items such as weddings, home renovations, second home purchases, major vacations, etc. Indicate costs in today’s dollars.

Description	Description	Description
<i>New car purchases for</i> _____	<i>New car purchases for</i> _____	<i>New car purchases for</i> _____
Date _____	Date _____	Date _____
Estimated cost \$ _____	Estimated cost \$ _____	Estimated cost \$ _____
Will replace every ____ years	Will replace every ____ years	Will replace every ____ years

Reliance on Information Provided: Summit shall rely upon information provided by you, and will not verify the accuracy of any such information. Accordingly, in the event that any such information provided is inaccurate or incomplete, the corresponding results or recommendations will be inaccurate or incomplete. It remains your responsibility to notify Summit of any changes in the information provided.

CASH FLOW WORKSHEET

Other major financial events

Description	Description	Description
_____	_____	_____
_____	_____	_____
Date	Date	Date
_____	_____	_____
Estimated cost	Estimated cost	Estimated cost
\$ _____	\$ _____	\$ _____
Comments	Comments	Comments
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



SUMMIT FINANCIAL STRATEGIES
4111 Worth Ave. #510, Columbus, OH 43219
t: (614) 885-1115 f: (614) 885-1495

Reliance on Information Provided: Summit shall rely upon information provided by you, and will not verify the accuracy of any such information. Accordingly, in the event that any such information provided is inaccurate or incomplete, the corresponding results or recommendations will be inaccurate or incomplete. It remains your responsibility to notify Summit of any changes in the information provided.