

Retirement Lifestyle Cash Flow

Monthly spending worksheet | Type into the shaded fields, then save your copy.

Prepared for

As of

Household

EXPENSE	MONTHLY AMOUNT (\$)	START DATE	END DATE
Mortgage - Principal & Interest			
Real Estate Taxes			
Homeowners Insurance			
Home Equity Loan (HELOC)			
Association Dues			
Rent			
Renters Insurance			
Utilities - Gas - Electric			
Water - Sewer			
Cable - Phone - Internet			
Maintenance & Improvement			
House Cleaning			

Daily Living

EXPENSE	MONTHLY AMOUNT (\$)	START DATE	END DATE
Food & Groceries			
Food & Dining Out			
Clothing			
Personal Care			
Travel - Domestic			
Travel - International			

Healthcare & Insurance

EXPENSE	MONTHLY AMOUNT (\$)	START DATE	END DATE
Health Insurance / HSA / Major Medical / Medi Share			
Prescription Expenses			
Life Insurance Premiums			
Long Term Care Insurance Premiums			
Disability Insurance Premiums			
Veterinarian Expenses			
Dental Care and/or Vision Care Expenses			
Medicare Part B (Out-Hospital) Premiums (IRRMA)			
Medicare Part D (Rx)			
Medicare Supplement or Gap Insurance			

Enter monthly estimates. Dates are optional. Continue with transportation and other expenses on page 2.

SOURCE DISCLOSURE (retained from the original worksheet)

The information provided by these projections and calculators is for illustrative purposes only. Estimates included are based on information supplied by the client such as estimated Social Security benefits, pension benefits, projections of cost of living increases, inflation rates, and federal and state income tax rates. Current federal income tax tables are used in certain calculations. All of these are subject to change and will have an effect on the long range outcome shown in the analysis. Any interest rates are hypothetical and are not meant to represent any specific investment. Thomas Gold Solutions, LLC has done the due-diligence to maintain the accuracy of the information and calculations, but the assumptions do not encompass all situations. Thomas Gold Solutions, LLC does not make any guarantees on the outcome of any recommendations made based upon the above information. The projections or other information generated by this report regarding the likelihood of various investment outcomes are hypothetical in nature, do not reflect actual investment results, and are not guarantees of future results.

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Prepared for

As of

Transportation

EXPENSE	MONTHLY AMOUNT (\$)	START DATE	END DATE
Auto Loans			
Auto Insurance			
Fuel			
Repairs			

Education & Loans

EXPENSE	MONTHLY AMOUNT (\$)	START DATE	END DATE
Credit Cards			
Tuition - Student Loans			
Alimony			
Child Support			

Entertainment

EXPENSE	MONTHLY AMOUNT (\$)	START DATE	END DATE
Parties & Events			
Sports - Hobbies - Lessons			
Membership Dues			
Vacation & Travel			

Miscellaneous

EXPENSE	MONTHLY AMOUNT (\$)	START DATE	END DATE
Charitable Donations			
Gifts			
Other			

MONTHLY SPENDING TOTAL

Enter manually.

Notes / questions for Emil

Save the completed PDF before closing. It does not submit or send automatically. Keep financial details private; ask Emil how to share securely. For reliable filling and saving, use Adobe Acrobat Reader.

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