

Your Financial House

Wishes

Charitable Giving, Gifts to Heirs

Likes

Vacation Home, Boat, Recreational Activities

Wants

Extras:

Travel, Hobbies and Entertainment

Needs

Basic Necessities of Life (Food, Shelter, Clothing) Life Insurance, Long-Term Care, Disability Insurance

[This page is a summary of the following pages. Do not enter numbers on this page.]

INCOME	Monthly Amount	Annual Amount	Notes	
Compensation—1 Compensation—2 Additional Income Sources				
Total Income EXPENSES	Monthly Amount	Annual Amount	Notes	
Personal Residence Food Clothing/Accessories Transportation Non- Property Insurance Investments Professional Fees Revolving Debt Service Taxes Monetary Gifts			Annual Sub-Category Totals:	
Wants Travel Hobbies/Entertainment Pets Personal Care			Annual Sub-Category Totals:	
Likes Vacation Homes Watercraft Recreation/Hobbies Education			Annual Sub-Category Totals:	
Wishes Heirs Charities/Institutions Gifts to Trusts Other			Annual Sub-Category Totals:	
Total Expenses Total Estimated Cash Flow				

Income Sources

[Enter monthly income amounts and any applicable notes. Annual numbers and totals will calculate automatically.]

INCOME SOURCES	Monthly Amount	Annual Amount	Notes	
Compensation-1 Salary Bonus Social Security Pension Deferred Compensation	\$	\$	Annual Sub-Category Totals: \$	
Compensation-2 Salary Bonus Social Security Pension Deferred Compensation	\$	\$	Annual Sub-Category Totals: \$	
Additional Income Sources Rental Income 2 Receivable Royalties Investment Income Investment Income 2 Other Other Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$	
Total Income	\$	\$		
Check this box when you're ready to calculate:				

Needs

[Enter monthly cash-flow expenses in the following categories and any applicable notes.]

NEEDS	Monthly Amount	Annual Amount	Notes	
Personal Residence Mortgage Taxes Home Owners Insurance Umbrella Insurance Association Fees Maintenance/Repairs Telephone/Fax Internet Cable Electricity Natural Gas Firewood Heating Oil & Other Fuels Water & Other Public Services Trash Lawn/Yard Care Alarm System Pool/Hot Tub Service Pest Control Other Miscellaneous	\$		Annual Sub-Category Totals: \$	
Food/Staples Groceries Supplies Personal Hygiene Toiletries Makeup Other Miscellaneous Clothing/Accessories New Purchases Dry Cleaning Other Other Other Other	\$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Annual Sub-Category Totals: \$ Annual Sub-Category Totals: \$	

Needs

NEEDS	Monthly Amount	Annual Amount	Notes	
Transportation Auto Loan/Lease Payment(s) Auto Insurance Fuel Tags/Registration Maintenance/Repairs Emergency Road Service Tolls/Parking Mass Transit Other Miscellaneous	\$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Annual Sub-Category Totals: \$	
Non-Property Insurance Life Long-Term Care Disability Health Dental Accidental Cancer Vision Care Prescription Medigap Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$	
Investments Retirement Plan Health Savings Account Non-Qualified Savings Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$	
Professional Fees CPA/Tax Planning Attorney/Legal Services Financial Planning Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$	

Needs

NEEDS	Monthly Amount	Annual Amount	Notes
Revolving Debt Service Credit Cards Hypo Loans Personal Loans/Notes Payable Bank Loans Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$
Taxes State Income Taxes Federal Income Taxes Other Miscellaneous	\$ \$ \$	\$	Annual Sub-Category Totals: \$
Monetary Gifts Family Miscellaneous	\$	\$	Annual Sub-Category Totals: \$
Total NEEDS	\$	\$	

Check this box when you're ready to calculate:

Wants

[Enter monthly cash-flow expenses in the following categories and any applicable notes.]

WANTS	Monthly Amount	Annual Amount	Notes
Travel Airfare Hotels Rental Cars Activities Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$
Hobbies/Entertainment Dining Out Club Dues Recreation Books, Magazines, Periodicals Videos Gaming Movies Event Tickets Music Tobacco Gambling (Lottery, Cards, etc) Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$
Pets Pet Food/Treats/Toys Veterinarian Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$
Personal Care Massage Nails Hair Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$
Total WANTS Check this box when you're ready to calculate the second of	\$	\$	

Likes

[Enter monthly cash-flow expenses in the following categories and any applicable notes.]

LIKES	Monthly Amount	Annual Amount	Notes	
Vacation Homes Down Payment Mortgage Taxes Homeowners Insurance Association Fees Maintenance Repairs Telephone/Fax Internet Cable Electricity Natural Gas/Heating Water & Other Public Services Trash Firewood Lawn/Yard Care Alarm System Pool/Hot Tub Service Pest Control Other		\$	Annual Sub-Category Totals: \$	
Watercraft Loan/Lease Payment(s) Boaters Insurance Fuel Tags/Registration Maintenance/Repairs Slip/Dock Fees Cash Down Payment Other Miscellaneous	\$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Annual Sub-Category Totals: \$	
Recreation/Hobbies Other Miscellaneous	\$ \$	\$ \$	Annual Sub-Category Totals: \$	
Education School Supplies/Books Tuition Payments Room & Board Lunch Fees School Uniforms Extracurricular Activities Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$	
Total LIKES	\$	\$		
Check this box when you're ready to calculate:				

Wishes

[Enter monthly cash-flow expenses in the following categories and any applicable notes.]

WISHES	Monthly Amount	Annual Amount	Notes	
Heirs Monetary Gifts Purchased Gifts School Supplies/Books Tuition Payments Room & Board Lunch Fees School Uniforms Extracurricular Activities Other Miscellaneous	\$	\$	Annual Sub-Category Totals: \$	
Charities/Institutions Monetary Donations Tithes Other Miscellaneous	\$ \$ \$	\$	Annual Sub-Category Totals: \$	
Gifts to Trusts Other	\$	\$	Annual Sub-Category Totals: \$ Annual Sub-Category Totals: \$	
Total WISHES	\$	\$		
Check this box when you're ready to calculate:				

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