

Financial Planning Worksheet

Date _____ Rank _____

Name _____ Age _____

Pay Grade _____ Yrs. in Svc. _____ Date Reported/PRD (Transfer) _____

Marital Status _____ Spouse's Name _____ Age _____

Spouse's Place of Employment _____

Number of Children and Ages _____

Home Address _____

Work Telephone _____ Home Telephone _____

Command & Referred By (Self, CMD, NMCRS, FFSC, etc.) _____

Amount of SGLI Elected _____ Amount of FSGLI Elected _____

TSP Monthly Contribution _____ MGIB Monthly Contribution _____

STATEMENT OF NET WORTH

ASSETS

Cash on hand \$ _____

Checking Accounts \$ _____

Savings Accounts \$ _____

Certificates of Deposit Cash \$ _____

Value of Life Insurance U.S. \$ _____

Savings Bonds \$ _____

Mutual Funds/Money Market \$ _____

Stocks/Bonds \$ _____

College Funds \$ _____

401(k)/403(b)/TSP \$ _____

Other (IRAs, etc.) \$ _____

Real Estate (Market Value)

Home \$ _____

Rental Property \$ _____

Other (Vac Home/Trailer/Time Share) \$ _____

Personal Property

Vehicles/Motorcycles/Boats \$ _____

Furniture \$ _____

Jewelry \$ _____

Other (Collectibles, etc.) \$ _____

Counseling Provided By: _____

Counselor Phone #: _____

Appointment Date: _____ Time: _____

Place: _____

LIABILITIES

Signature Loans \$ _____

Auto Loans or Leases \$ _____

Consolidation Loans \$ _____

Student Loans \$ _____

NEX/AAFES (Star Card) \$ _____

Department Store Credit Cards \$ _____

Other Credit Cards \$ _____

NMCRS (Loan) \$ _____

Other (Friends, Relatives, etc.) \$ _____

Advance/Over Payments \$ _____

Mortgages-Balances Due

Home \$ _____

Rental Property \$ _____

Other (Vac Home/Trailer/Time Share) \$ _____

TOTAL ASSETS	\$ _____
TOTAL LIABILITIES	\$ _____
NET WORTH	
(Assets - Liabilities)	\$ _____

MONTHLY INCOME

MONTHLY INCOME					
ENTITLEMENTS	ACTUAL		PROJECTED		REMARKS
* Base Pay					
Basic Allowance for Housing (BAH I or II)					
Overseas Housing Allowance (OHA)					
Basic Allowance for Subsistence (BAS)					
Family Separation Allowance (FSA)					
* Flight Pay/Diving Pay/Flight Deck Pay					
* Submarine Pay					
* Other Hazardous Duty Pay					
* Sea Pay					
Taxable COLA					
Other (tax exempt/allowance eg. COLA/FSSA)					
TOTAL MILITARY COMPENSATION (A)					
* Taxable pay ()					Excludes pretax ded for TSP/MGIB
DEDUCTIONS	ACTUAL		PROJECTED		REMARKS
ALLOTMENT					For/ends?
ALLOTMENT					For/ends?
ALLOTMENT					For/ends?
ALLOTMENT					For/ends?
ALLOTMENT					For/ends?
Family SGLI (For Spouses)					
Servicemembers' Group Life Insurance (SGLI)					
Uniform Services TSP					
MGIB					
FITW Filing Status Actual					Proj. Status:
FICA (Social Security)					Base Pay Only, Excludes MGIB
FICA (Medicare)					Base Pay Only, Excludes MGIB
State Income Tax					State Claimed:
AFRH (Armed Forces Retirement Home)					
TRICARE Dental Plan (TDP)					
Advance Payments					Ends:
Overpayments					Ends:
TOTAL DEDUCTIONS (B)	\$		\$		
CALCULATE NET INCOME	ACTUAL		PROJECTED		REMARKS
Service Member's Take Home Pay (A-B)	\$		\$		Divide by 2 for Payday Amount
Service Member's Other Earnings (less taxes)					
Spouse's Earnings (less taxes)					
ALLOTMENT					
ALLOTMENT					
ALLOTMENT					
ALLOTMENT					
ALLOTMENT					
Family SGLI (For Spouses)					
Servicemembers' Group Life Insurance (SGLI)					
Uniform Services TSP					
MGIB					
TRIDARE Dental Plan (TDP)					
Advance Payments					
Overpayments					
Child Support/Alimony (Received/Income)					
Other Income (e.g. SSI, Rental Income)					
TOTAL MONTHLY INCOME	\$		\$		

***Note:** Pay Entitlements are taxable. Allowance Entitlements are non-taxable.

MONTHLY SAVINGS AND LIVING EXPENSES

Note: Actual or Projected Figures can be carried forward to spending plan.

SAVINGS		ACTUAL	PROJECTED	REMARKS
SAVINGS	Emergency Fund (1-3 months)			Monthly Contribution Amount
Goal: 10% of Net Income	Reserve Fund			
Actual Projected	"Goal-Getter" Fund			
\$ \$	Investments/IRAs/TSP/etc.			
TOTAL SAVINGS AND INVESTMENTS °10%		\$	\$	
LIVING EXPENSES		ACTUAL	PROJECTED	REMARKS
HOUSING	Furnishings			
	Maintenance/Repairs			
	Mortgage/Rent			
	Taxes/Fees			
FOOD	Dining Out			
	Groceries			
	Lunches			Include school and work lunches
	Vending Machines			
	Meal Deductions			
UTILITIES	Cable/Satellite TV			
	Cellular/Pagers/Phone Cards			
	Electricity			
	Internet Service			
	Natural Gas/Propane			
	Telephone			Local=\$ ____ Long Distance=\$ ____
	Water/Garbage/Sewage			
CHILD CARE	Allowances			
	Daycare			
	Support			Include other dependant care
AUTOMOBILE	Gasoline			
	Maintenance/Repairs			
	Other			
CLOTHING	Laundry/Dry Cleaning			
	Purchases (\$50 monthly per person)			
INSURANCE	Automobile			
	Health/Life			
	Homeowners/Renters			
	SGLI/FSGLI			Both service member/Family SGLI
	TRICARE Dental			
HEALTHCARE	Dental			
	Eye Care			
	Hospital/Physician			
	Prescriptions			
EDUCATION	Books			
	Fees (Other/Room & Board)			
	Tuition			
	MGIB			Montgomery GI Bill (MGIB)
CONTRIBUTIONS	Charities (CFC/NMCRS)			
	Club Dues/Association Fees			
	Religious			
LEISURE	Athletic Events/Sporting Goods			Include spectator sports
	Books/Magazines			
	Computer Products (Software/Hardware)			
	DVD/VHS & Video Games Rentals			
	DVD's & CD's			
	Entertainment			
	Lessons			Dance, Music, Self-Defense, Tutor
	Toys & Games			
	Travel/Lodging			
PERSONAL	Beauty Shop/Nails			
	Barber Shop			
	Cigarettes/Other Tobacco			
	Vending Machines			
	Liquor/Beer/Wine			ABC, Package Store, etc.
	Other (Toiletries, Supplements, etc.)			
GIFTS	Holidays			
	Birthdays/Anniversaries			
PET CARE	Food/Supplies			
	Veterinarian/Service (Boarding/Grooming)			
MISCELLANEOUS	ATM Fees/Stamps/etc.			
	Other			Recommend \$50-\$150 Bu" er
TOTAL MONTHLY LIVING EXPENSES ~70%°		\$	\$	

INDEBTEDNESS 20%						
CREDITOR	PURPOSE	MONTHLY PAYMENT	BALANCE	PROJECTED PAYMENT	REMARKS (Mos Behind, Pd by Allotment, etc.)	APR %
1. US Govt.	Advance Pay				Automatic Deduction	
2. US Govt.	Over Payments				Automatic Deduction	
3.						
4.						
5.						
6.						
7.						
8.						
8.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						
TOTAL						

SUMMARY

	ACTUAL	PROJECTED
NET INCOME (Bottom of Page 2)		
SAVINGS & INVESTMENTS (Page 3)	-	
LIVING EXPENSES (Page 3)	-	
AMOUNT LEFT TO PAY DEBTS	=	
TOTAL MONTHLY DEBT PMTS (Page 4)	-	
SURPLUS OR DEFICIT	=	
DEBT TO INCOME RATIO	=	

(Total Monthly Debt Payments ÷ Net Income x 100 = Debt-to-Income Ratio)

ACTION PLAN

INCREASE INCOME

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

DECREASE LIVING EXPENSES

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

DECREASE INDEBTEDNESS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

REFERRALS/RECOMMENDED TRAINING

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

SETTING YOUR GOALS (Short & Long Term)

GOAL	COST	DATE WANTED	= MONTHLY SAVINGS TO REACH GOAL
1.			
2.			
3.			
4.			
5.			
6.			

PROJECTED 12 MONTH BUDGET

Note: Actual or Projected Figures can be used in 12 month budget

INCOME		MONTH 1	MONTH 2	MONTH 3	MONTH 4
NET Income	Civilian Net Income				
	Spouse Net Income				
	Other Income				
	Child Support/Alimony				
TOTAL NET INCOME		\$	\$	\$	\$
SAVING		MONTH 1	MONTH 2	MONTH 3	MONTH 4
SAVINGS	Emergency, Reserve, Goal Getter				
	10% Investments/IRAs/401(k), TSP, etc...				
TOTAL SAVINGS		\$	\$	\$	\$
LIVING EXPENSES		MONTH 1	MONTH 2	MONTH 3	MONTH 4
Housing	Rent, Mortgages, taxes, repairs				
Utilities	Cable, gas, telephone, cell, electric, water, garbage				
Food	Dining out, vending machines				
Automobile Insurance	Groceries				
	Gasoline, Maintenance/Repairs				
	Auto				
	Health/Dental				
Insurance	Health/Dental Co-Pays/Deductibles				
	Home/Renters/Life				
Clothing	Laudry/Dry Cleaning, purchases				
Child care	Allowances, daycare, diapers, wipes				
	Child Support				
Pet Care	Food, supplies, grooming, vet				
Personal	Beauty shop/barber, health clubs				
	Cigarettes, tobacco, wine, beer				
Education	Books, supplies, fees				
	Tuition				
Leisure/Hobbies	Athletic Events, sporting goods,				
	Books, magazines, CDs, movies, toys,				
	Travel, Other entertainment				
Contributions	Charities (CFC/NMCRS)				
Gifts	Birthdays, anniversaries				
Miscellaneous	ATM Fees/Stamps/etc.				
	Other				
TOTAL LIVING EXPENSES		\$	\$	\$	\$
CREDITOR/DEBT PAYMENTS		MONTH 1	MONTH 2	MONTH 3	MONTH 4
TOTAL DEBT PAYMENTS		\$	\$	\$	\$
SUMMARY		MONTH 1	MONTH 2	MONTH 3	MONTH 4
Total Net Income					
Total Savings	-				
Total Living Expenses	-				
Total Debt Payments	-				
SURPLUS OR DEFICIT	=	\$	\$	\$	\$

MONTHLY SPENDING PLAN						
<input type="checkbox"/> TOTAL NET INCOME <input type="checkbox"/> TOTAL TAKE HOME PAY	MONTH		MONTH		MONTH	
BY PAYDAY	1st	15th	1st	15th	1st	15th
*If using take-home pay amount, do not include any savings, expenses, or debt payments that are deducted from pay or paid by allotment.						

P = Planned Expenses A = Actual Expenses	Budgeted Amount	P	A	P	A	P	A	P	A	P	A	P	A
Savings & Investments													
Housing													
Food													
Utilities													
Transportation													
Clothes													
Insurance													
Health													
Education													
Contributions													
Subscriptions													
Personal													
Entertainment													
Dependent Care													
Miscellaneous													
Creditors													
TOTALS	\$												

For help completing the Financial Planning Worksheet or answers to other financial questions contact MCCS Cherry Point Marine and Fmaily Program's Financial Counselors.

Personal Financial Management Program

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