

# Budget Planner

## Supplementary Form # 5

Determining your regular expenses is an important step in identifying the level of income you need to support day to day living expenses and the gaps or surpluses to be explored further with your financial planner. Please take the time to complete this as accurately as possible. If you already have a budget in place or know your total annual expenses please go directly to the next page.

	Amount	Frequency (Wk, Mth, Qtr)	Yearly Total	Is this expense tax deductible?
<b>Living Expenses</b>				
Food	\$ _____	_____	\$ _____	_____
Clothing	\$ _____	_____	\$ _____	_____
Medical/Dental/Pharmacy	\$ _____	_____	\$ _____	_____
Alcohol/Cigarettes	\$ _____	_____	\$ _____	_____
Public Transport/Taxi Fares	\$ _____	_____	\$ _____	_____
Other Personal Spending - Client 1	\$ _____	_____	\$ _____	_____
- Client 2	\$ _____	_____	\$ _____	_____
<b>Total Living Expenses</b>			<b>\$ _____</b>	
<b>Entertainment Expenses</b>				
Travel and holidays	\$ _____	_____	\$ _____	_____
Dining Out	\$ _____	_____	\$ _____	_____
Sport/Recreation/Hobbies	\$ _____	_____	\$ _____	_____
Club memberships/Sporting fees etc	\$ _____	_____	\$ _____	_____
Books/Magazines/Newspapers	\$ _____	_____	\$ _____	_____
Other entertainment	\$ _____	_____	\$ _____	_____
<b>Total Entertainment Expenses</b>			<b>\$ _____</b>	
<b>Housing Expenses</b>				
Mortgage/Rent	\$ _____	_____	\$ _____	_____
Council/Shire/Body Corporate/ Water Rates	\$ _____	_____	\$ _____	_____
Electricity/Gas/Telephone etc	\$ _____	_____	\$ _____	_____
House and Contents Insurance	\$ _____	_____	\$ _____	_____
Home maintenance	\$ _____	_____	\$ _____	_____
Furnishings/Appliances	\$ _____	_____	\$ _____	_____
<b>Total Housing Expenses</b>			<b>\$ _____</b>	
<b>Motor Vehicle Expenses</b>				
Loan/Lease Repayments	\$ _____	_____	\$ _____	_____
Registration and Third party	\$ _____	_____	\$ _____	_____
Insurance	\$ _____	_____	\$ _____	_____
Petrol and other running costs	\$ _____	_____	\$ _____	_____
Maintenance/Service/Repairs	\$ _____	_____	\$ _____	_____
Licence fees/Fines/Parking/Road assistance	\$ _____	_____	\$ _____	_____
<b>Total Motor Vehicle Expenses</b>			<b>\$ _____</b>	

**Insurances**

Medical/Health	\$		\$	
Life and TPD	\$		\$	
Income Protection	\$		\$	
Via superannuation contributions	\$		\$	
Trauma Cover	\$		\$	
<b>Total Insurances</b>			<b>\$</b>	

**Miscellaneous Expenses**

Professional Services	\$		\$	
Professional Memberships	\$		\$	
Work Related Expenses	\$		\$	
Gifts and donations	\$		\$	
Education expenses	\$		\$	
Child care	\$		\$	
Pet/Vet Fees	\$		\$	
Savings Plans (Existing Investments)	\$		\$	
Capital expenses to investment properties	\$		\$	
Other vehicle expenses	\$		\$	
Investment Loans	\$		\$	
Credit Cards	\$		\$	
Other Loans	\$		\$	
Other	\$		\$	
Other	\$		\$	
<b>Total Miscellaneous Expenses</b>				

**Total Expenses**

**\$**

Do you anticipate any changes in your expenditure over the next 12 months? If **Yes**, please provide details.

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Do you feel there is an opportunity to save any additional funds? If **Yes**, please provide details.

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