

**Estimated Budget (Previous Year)****Actual Budget (Current Year)****Anticipated Income**

<b>Income Source</b>	<b>Monthly Amount</b>
Pension	
Social Security	
<b>Total Monthly Income</b>	<b>\$0.00</b>

<b>Cash Accounts</b>	<b>Value on (Date)</b>
Checking Account	
Savings Account	
Brokerage Account	
<b>Total Cash</b>	<b>\$0.00</b>

**Anticipated Expenses**

	<b>Monthly Amount</b>
Assisted Living/Nursing Home	
Mortgage	
Home/Auto Insurance	
Property Taxes	
Income Taxes (Federal and State)	
Vehicle Loan	
Supplemental Health Insurance	
Medicare Part D	
Medications	
Medical (doctors, etc.)	
Cable	
Telephone	
Electricity	
Water/Trash	
Groceries and Personal Needs	
Administrative Expenses (Fiduciary/Attorney)	

**Total Monthly Expenses** **\$0.00****Excess of Expenses over Income** **\$0.00****Total Cash Required for First Year** **\$0.00****Cash Available for First Year** **\$0.00****Total Remaining Cash after the First Year** **\$0.00****Actual Income**

<b>Income Source</b>	<b>Monthly Amount</b>
Pension	
Social Security	
<b>Total Monthly Income</b>	<b>\$0.00</b>

<b>Cash Accounts</b>	<b>Value on (Date)</b>
Checking Account	
Savings Account	
Brokerage Account	
<b>Total Cash</b>	<b>\$0.00</b>

**Actual Expenses**

	<b>Monthly Amount</b>
Assisted Living/Nursing Home	
Mortgage	
Home/Auto Insurance	
Property Taxes	
Income Taxes (Federal and State)	
Vehicle Loan	
Supplemental Health Insurance	
Medicare Part D	
Medications	
Medical (doctors, etc.)	
Cable	
Telephone	
Electricity	
Water/Trash	
Groceries and Personal Needs	
Administrative Expenses (Fiduciary/Attorney)	

**Total Monthly Expenses** **\$0.00****Excess of Expenses over Income** **\$0.00****Total Cash Required for First Year** **\$0.00****Cash Available for First Year** **\$0.00****Total Remaining Cash after the First Year** **\$0.00**

**Estimated Budget (Following Year)**

**Actual Income**

<b>Income Source</b>	<b>Monthly Amount</b>
Pension	
Social Security	
<b>Total Monthly Income</b>	<b>\$0.00</b>

<b>Cash Accounts</b>	<b>Value on (Date)</b>
Checking Account	
Savings Account	
Brokerage Account	
<b>Total Cash</b>	<b>\$0.00</b>

**Actual Expenses**

	<b>Monthly Amount</b>
Assisted Living/Nursing Home	
Mortgage	
Home/Auto Insurance	
Property Taxes	
Income Taxes (Federal and State)	
Vehicle Loan	
Supplemental Health Insurance	
Medicare Part D	
Medications	
Medical (doctors, etc.)	
Cable	
Telephone	
Electricity	
Water/Trash	
Groceries and Personal Needs	
Administrative Expenses (Fiduciary/Attorney)	
<b>Total Monthly Expenses</b>	<b>\$0.00</b>
<b>Excess of Expenses over Income</b>	<b>\$0.00</b>
<b>Total Cash Required for First Year</b>	<b>\$0.00</b>
<b>Cash Available for First Year</b>	<b>\$0.00</b>
<b>Total Remaining Cash after the First Year</b>	<b>\$0.00</b>