



## Your Regular Expenditure

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To create your Investment Plan we require details of your regular financial commitments.

HOME	
	monthly (£)
Utilities	
Electricity	_____
Gas	_____
Water rates	_____
Council tax	_____
Telephone and internet	_____
Solid fuel or oil	_____
Insurance (buildings and contents)	_____
TV licence	_____
Sky / Digital TV	_____
Alarm	_____
Garden (gardener, plants, etc.)	_____
Help in house	_____
Supermarket shopping	_____
Wines and spirits	_____
Laundry and dry cleaning	_____
.....	_____
.....	_____
<b>(A)</b> monthly HOME expenses <b>TOTAL</b>	_____

CAR	
	monthly (£)
Road tax	_____
Insurance	_____
Fuel	_____
.....	_____
<b>(B)</b> monthly CAR expenses <b>TOTAL</b>	_____
	annually (£)
Servicing and repairs	_____
AA or RAC subscription	_____
.....	_____
<b>(C)</b> annual CAR expenses <b>TOTAL</b>	_____

LIVING	
	monthly (£)
Own clothing and footwear	_____
Family clothing and footwear	_____
Health insurance (BUPA or PPP)	_____
Mobile phones	_____
Eating out	_____
Cigarettes and tobacco	_____
Subscriptions	_____
Sports and hobbies	_____
Newspapers/books/CDs or downloads	_____
Gifts to charities	_____
Travelling expenses (not car)	_____
.....	_____
.....	_____
<b>(D)</b> monthly LIVING expenses <b>TOTAL</b>	_____
	annually (£)
Holidays	_____
Holiday home	_____
Birthday presents	_____
Christmas presents	_____
.....	_____
.....	_____
<b>(E)</b> annual LIVING expenses <b>TOTAL</b>	_____

INVESTMENTS & LIFE ASSURANCE	
	monthly (£)
Life assurance premiums	_____
Endowment premiums	_____
Pension contributions	_____
Regular saving in building society	_____
Regular saving in ISAs, etc.	_____
.....	_____
<b>(F)</b> monthly INVESTMENTS <b>TOTAL</b>	_____



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PROFESSIONAL FEES	LESS FREQUENT EXPENDITURE
<b>monthly (£)</b>	If you have expenditure which occurs regularly but less frequently than annually (e.g. house maintenance) please indicate the expected level of expenditure.
Accountant (non business) _____	
Dentist _____	<b>every 2 -3 years (£)</b> _____
Doctor and prescriptions _____	<b>every 3 -5 years (£)</b> _____
Financial planner _____	<b>less frequent (£)</b> _____
Optician _____	_____
Osteopath / Chiropractor _____	_____
Veterinary surgeon _____	_____
..... _____	_____
..... _____	_____
<b>G</b> monthly PROFESSIONAL fees <b>TOTAL</b> _____	_____

YOUR REGULAR EXPENDITURE SUMMARY	
(£)	(£)
<b>A</b> monthly HOME expenses <b>TOTAL</b> _____	<b>C</b> annual CAR expenses <b>TOTAL</b> _____
<b>B</b> monthly CAR expenses <b>TOTAL</b> _____	<b>E</b> annual LIVING expenses <b>TOTAL</b> _____
<b>D</b> monthly LIVING expenses <b>TOTAL</b> _____	<b>2</b> annual <b>TOTAL</b> _____
<b>F</b> monthly INVESTMENTS <b>TOTAL</b> _____	<b>1</b> monthly <b>TOTAL</b> x 12 _____
<b>G</b> monthly PROFESSIONAL fees <b>TOTAL</b> _____	<b>2</b> annual <b>TOTAL</b> _____
monthly <b>TOTAL</b> _____	<b>1 + 2 = OVERALL ANNUAL TOTAL</b> _____
<b>1</b> monthly <b>TOTAL</b> x 12 _____	

Thank you for the information you have provided.

Name : \_\_\_\_\_ Signature : \_\_\_\_\_  
 Address : \_\_\_\_\_ Date : \_\_\_\_\_

Wealthflow provide objective, independent advice with uncompromising integrity and complete confidentiality. Please return your completed form to : Duncan R Glassey, Wealthflow LLP, Abbey House, 83 Princes Street, Edinburgh EH2 2ER