

MY PERSONAL FINANCIAL PLANNER

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A. MONTHLY INCOME & EXPENSES		C. 50-30-20 BUDGET PLAN			
Income		Cat.	%	Target ■	Actual ■
Take-home salary	■ _____	NEEDS (EMI/rent/bills)	50%	■ _____	■ _____
Other income	■ _____	WANTS (dining/shopping)	30%	■ _____	■ _____
TOTAL INCOME (A)	■ _____	SAVINGS & INVEST	20%	■ _____	■ _____
Fixed Expenses		D. EMERGENCY FUND			
Home/car EMI	■ _____	Monthly expenses	■ _____		
Insurance prems.	■ _____	Target fund (x6)	■ _____		
School fees (mo.)	■ _____	Current balance	■ _____		
Variable Expenses		Gap to fill	■ _____		
Groceries/house	■ _____	Monthly top-up amount	■ _____ / month		
Fuel/transport	■ _____	Where I'll keep it	_____		
Dining/shopping	■ _____	E. INSURANCE REVIEW			
Other expenses	■ _____	Cover	Have?	Sum / Action	
TOTAL EXPENSES(B)	■ _____	Term Life Insurance	■ Y ■ N	■ ___L Need: 10–15x income	
B. NET WORTH STATEMENT		Health (personal)	■ Y ■ N	■ ___L Need: min ■5L	
ASSETS	LIABILITIES	Health (family floater)	■ Y ■ N	■ ___L _____	
Bank savings	■ _____	School group cover	■ Y ■ N	Often low — supplement it	
FD / RD	■ _____				
MF / Stocks	■ _____				
PPF / NPS / EPF	■ _____				
Property (value)	■ _____				
TOTAL ASSETS (D)	■ _____				
		NET WORTH = D – E = ■ _____			
		SURPLUS / DEFICIT = A – B = ■ _____			

F. MY INVESTMENT PLAN

Instrument	Currently investing?	Current <input type="checkbox"/> /month	Target <input type="checkbox"/> /month	Start/increase by
PPF	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> _____	<input type="checkbox"/> _____	_____
NPS	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> _____	<input type="checkbox"/> _____	_____
ELSS (Tax-saving MF)	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> _____	<input type="checkbox"/> _____	_____
Equity / Balanced MF SIP	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> _____	<input type="checkbox"/> _____	_____
FD / RD	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> _____	<input type="checkbox"/> _____	_____
Sukanya Samridhi	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> _____	<input type="checkbox"/> _____	_____
TOTAL		<input type="checkbox"/> _____	<input type="checkbox"/> _____	

G. MY FINANCIAL GOALS

Goal	Target <input type="checkbox"/>	By When	Goal	Target <input type="checkbox"/>	By When
Short-term (0–2 yr)	_____	_____	Med-term (2–7 yr)	_____	_____
Short-term #2	_____	_____	Med-term #2	_____	_____
Long-term Retirement	<input type="checkbox"/> _____ corpus	_____	Children's Education	<input type="checkbox"/> _____ corpus	_____

H. MY 90-DAY ACTION CHECKLIST

Week 1–2: ASSESS

- Fill in Sections A & B (income, expenses, net worth)
- Check all insurance policies and update nominations
- Calculate: months of expenses covered by current savings

Week 3–4: PROTECT

- Open liquid fund / sweep-in FD for emergency fund
- Get term insurance quote (1 Cr cover = ~700/month)
- Review and upgrade health insurance if needed

Month 2: INVEST

- Open PPF account (SBI / Post Office — 10 min to set up)
- Start ELSS SIP — _____ / month
- Start equity MF SIP — auto-debit on salary date

Month 3: GROW

- Increase SIP by 500 — calculate retirement corpus
- Read: The Psychology of Money — target date: _____
- Teach one family member what you learned today

MY FINANCIAL PLEDGE TO MYSELF

The ONE financial habit I commit to building this month: _____

The ONE investment I will start or increase — and the amount: _____

The book I will read first and the date I will finish it: _____

One person in my family I will share today's learnings with: _____

Signature: _____

Date: _____

Next Review: _____

"Pay yourself first. Invest the rest. Ignore what others think."