

Lifestyle Worksheet



The following worksheet will assist in calculating your pre-retirement lifestyle needs. Enter the monthly after- tax cost of each of the following areas.

Food and Shelter

Pre-Retirement Lifestyle

Retirement Lifestyle

Groceries \$ _____ \$ _____

Mortgage/Rent \$ _____ \$ _____

Property Taxes \$ _____ \$ _____

Maintenance/Upkeep \$ _____ \$ _____

Insurance \$ _____ \$ _____

Utilities \$ _____ \$ _____

\$ _____ \$ _____

\$ _____ \$ _____

Debt Service

Car Loans \$ _____ \$ _____

Retail Credit Cards \$ _____ \$ _____

Consumer Loans \$ _____ \$ _____

Lines of Credit \$ _____ \$ _____

Credit Cards \$ _____ \$ _____

Previous Years' Tax \$ _____ \$ _____

\$ _____ \$ _____

\$ _____ \$ _____

Personal Care

Child Care \$ _____ \$ _____

Prescriptions \$ _____ \$ _____

Clothing \$ _____ \$ _____

Personal Products \$ _____ \$ _____

Health and Dental \$ _____ \$ _____

Eye Care Products \$ _____ \$ _____

\$ _____ \$ _____

\$ _____ \$ _____

Lifestyle Worksheet



Transportation

Pre-Retirement Lifestyle

Retirement Lifestyle

Lease Payments \$ _____ \$ _____

Gas \$ _____ \$ _____

Insurance \$ _____ \$ _____

Repairs and Maintenance \$ _____ \$ _____

Public Transport \$ _____ \$ _____

\$ _____ \$ _____

\$ _____ \$ _____

Leisure/Discretionary

Phone (Home and Cellular) \$ _____ \$ _____

Internet \$ _____ \$ _____

Television \$ _____ \$ _____

Entertainment \$ _____ \$ _____

Dining Out \$ _____ \$ _____

Vacations \$ _____ \$ _____

Children's Activities \$ _____ \$ _____

Memberships \$ _____ \$ _____

Gifts \$ _____ \$ _____

Smoking \$ _____ \$ _____

Beer, Wine, and Spirits \$ _____ \$ _____

\$ _____ \$ _____

\$ _____ \$ _____

Lifestyle Worksheet



Savings and Investing

Pre-Retirement Lifestyle

Retirement Lifestyle

Employee Pension Plans	\$ _____	\$ _____
RRSP Contributions	\$ _____	\$ _____
TFSA Contributions	\$ _____	\$ _____
RESP Contributions	\$ _____	\$ _____
RDSP Contributions	\$ _____	\$ _____
Cash Accounts	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

Personal Insurance

Life Insurance	\$ _____	\$ _____
Critical Illness Insurance	\$ _____	\$ _____
Disability Insurance	\$ _____	\$ _____
Long-Term Care Insurance	\$ _____	\$ _____
Health and Dental Insurance	\$ _____	\$ _____
Travel Insurance	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

Total After-Tax Lifestyle	\$ _____	\$ _____
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