



## Budgeting Worksheet for Residents

### MONTHLY INCOME:

Salary (after deductions) \_\_\_\_\_  
 Spouse salary (after deductions) \_\_\_\_\_  
 Investment income \_\_\_\_\_  
 Gifts \_\_\_\_\_  
 Other \_\_\_\_\_  
**Total Fixed Income** \_\_\_\_\_

### MONTHLY FIXED EXPENSES:

Regular savings \_\_\_\_\_  
 Rent/mortgage \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Taxes (federal, state) \_\_\_\_\_  
 Vehicle payments \_\_\_\_\_  
 Other transportation \_\_\_\_\_  
 Personal loans \_\_\_\_\_  
 Education loans \_\_\_\_\_  
 Insurance (life and health) \_\_\_\_\_  
 Home/renters insurance \_\_\_\_\_  
 Auto insurance \_\_\_\_\_  
 Auto registration/taxes \_\_\_\_\_  
 Other \_\_\_\_\_  
**Total Fixed Expenses** \_\_\_\_\_

### MONTHLY VARIABLE EXPENSES:

Food/household supplies \_\_\_\_\_  
 Dining out \_\_\_\_\_  
 Clothes \_\_\_\_\_  
 Laundry/dry cleaning \_\_\_\_\_  
 Gas, oil, auto maintenance \_\_\_\_\_  
 Parking \_\_\_\_\_  
 Medical/dental/eye care \_\_\_\_\_  
 Entertainment \_\_\_\_\_  
 Travel/vacation \_\_\_\_\_  
 Utilities \_\_\_\_\_  
 CDs/books/journals \_\_\_\_\_  
 Personal care \_\_\_\_\_  
 Subscriptions \_\_\_\_\_  
 Cable TV and internet \_\_\_\_\_  
 Credit card payments \_\_\_\_\_  
 Charity/contributions/gifts \_\_\_\_\_  
 Savings for interviews/relocation \_\_\_\_\_  
 Test prep course/materials \_\_\_\_\_  
 Exam/licensing fees \_\_\_\_\_  
 Other \_\_\_\_\_

**Total Variable Expenses** \_\_\_\_\_  
**Plus Total Fixed Expenses** \_\_\_\_\_  
**Equals Total Monthly Expenses** \_\_\_\_\_

**Total Income** \_\_\_\_\_  
**Less Total Expenses** \_\_\_\_\_

**Equals Total Discretionary Income (or Deficit)** \_\_\_\_\_