

# IMPORTANT INFORMATION *Document*

## ALL FAMILY MEMBERS ♥ { ORGANIZED FROM OLDEST TO YOUNGEST }

- Birthday
- Social Security Number
- Driver License Number

## WIFI USERNAME & PASSWORD

## ALL MONTHLY BILL INFO ♥ { IN THE ORDER THE BILLS COME EACH MONTH }

- Company // Account Number
- Website URL // Username // Password
- When the bill comes // When the bill is due
- How this bill is paid (autopay, paper bill, emailed statement, check, credit card, etc)
- Customer Service Phone Number
- Address
- Any other info (if you call with a problem, just open up this document and type notes right in here so you remember)

## ANYTHING ELSE YOU HAVE A USERNAME / PASSWORD FOR

{ ORGANIZED ALPHABETICALLY, WITH THE SAME INFO AS THE BILLS IN ABOVE SECTION }

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## INSURANCE PLANS ♥ HEALTH, HSA, DENTAL, AUTO, HOMEOWNER, LIFE

- Policy Number / Group Number
- Username // Password
- Website
- Phone Number
- Address
- Summarize policy coverage in your own words
- Copays
- What needs referrals / What doesn't

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## DOCTORS, DENTISTS, ETC.

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## RENTAL / HOUSING HISTORY