

*Life Planner*

notes

# To Do Lists

*To do right now*

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*To do this week*

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*To do this month*

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# P a s s w o r d   K e e p e r

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WEBSITE  
USERNAME  
PASSWORD  
NOTES

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USERNAME  
PASSWORD  
NOTES

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WEBSITE  
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PASSWORD  
NOTES

WEBSITE  
USERNAME  
PASSWORD  
NOTES

# P e r s o n a l C o n t a c t s

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NAME  
PHONE  
ADDRESS  
EMAIL  
BIRTHDAY

NAME  
PHONE  
ADDRESS  
EMAIL  
BIRTHDAY

NAME  
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EMAIL  
BIRTHDAY

NAME  
PHONE  
ADDRESS  
EMAIL  
BIRTHDAY

# Birthday Tracker

January

February

March

April

May

June

July

August

September

October

November

December

# Event Tracker

January

February

March

April

May

June

July

August

September

October

November

December

# Special Event Planner

*Upcoming event* \_\_\_\_\_

*Date and time* \_\_\_\_\_

need to know info

to do list

notes

Month:

S M T W T F S




# Personal Goals

*Goal*

*Why is this important?*

*what steps do i need to make?*

*Goal*

*Why is this important?*

*what steps do i need to make?*

*Goal*

*Why is this important?*

*what steps do i need to make?*

# Monthly Habit Tracker

*Habit*

*Daily Count*

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

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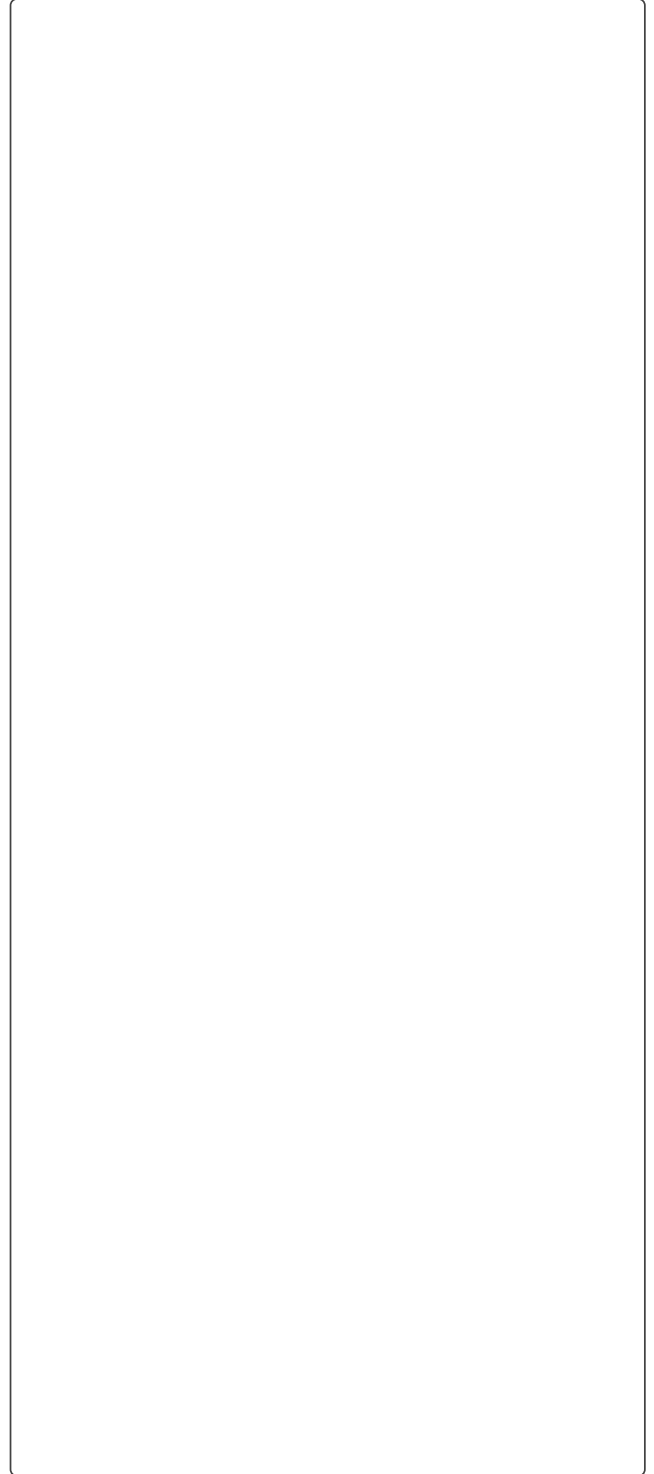
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

# Wish List


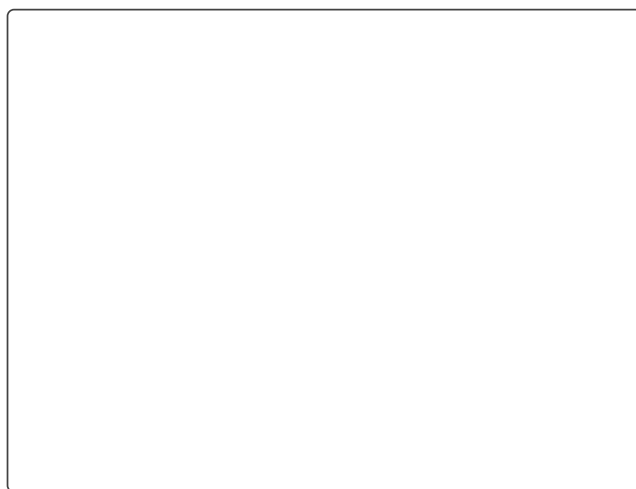
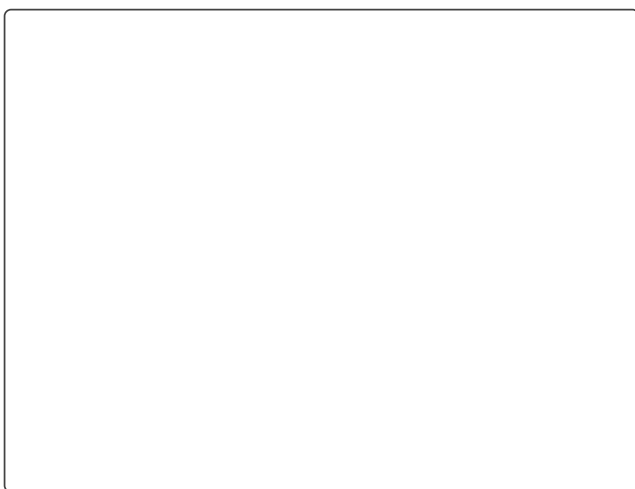
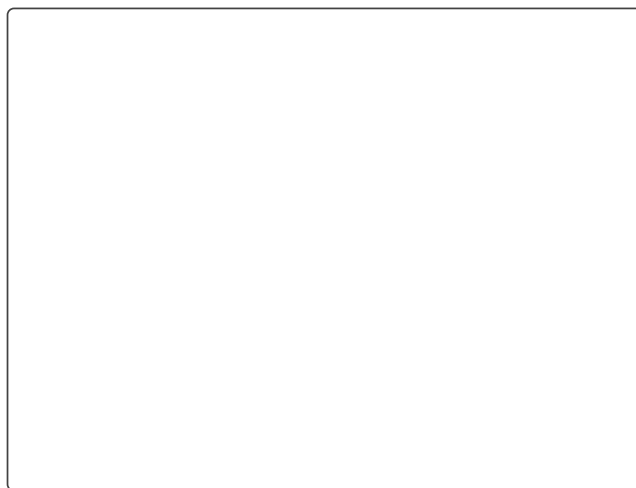
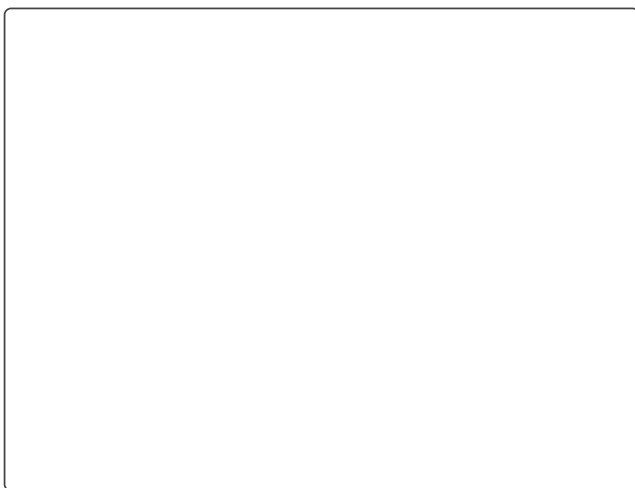
*Needs*

A large, empty rectangular box with a thin black border, intended for listing needs.

*Wants*

A large, empty rectangular box with a thin black border, intended for listing wants.

# Gift Ideas



*Bills & Budget*





# Monthly Expenses Tracker

*Month:*

Bills

Monthly total:

Groceries

Monthly total:

Monthly total:

Eating Out

Monthly total:

Monthly total:

Misc. Shopping

Monthly total:

# Annual Expenses

January

February

March

April

May

June

July

August

September

October

November

December

# Financial Goals

*Goal*

*Why is this important?*

*what steps do i need to make?*

*Goal*

*Why is this important?*

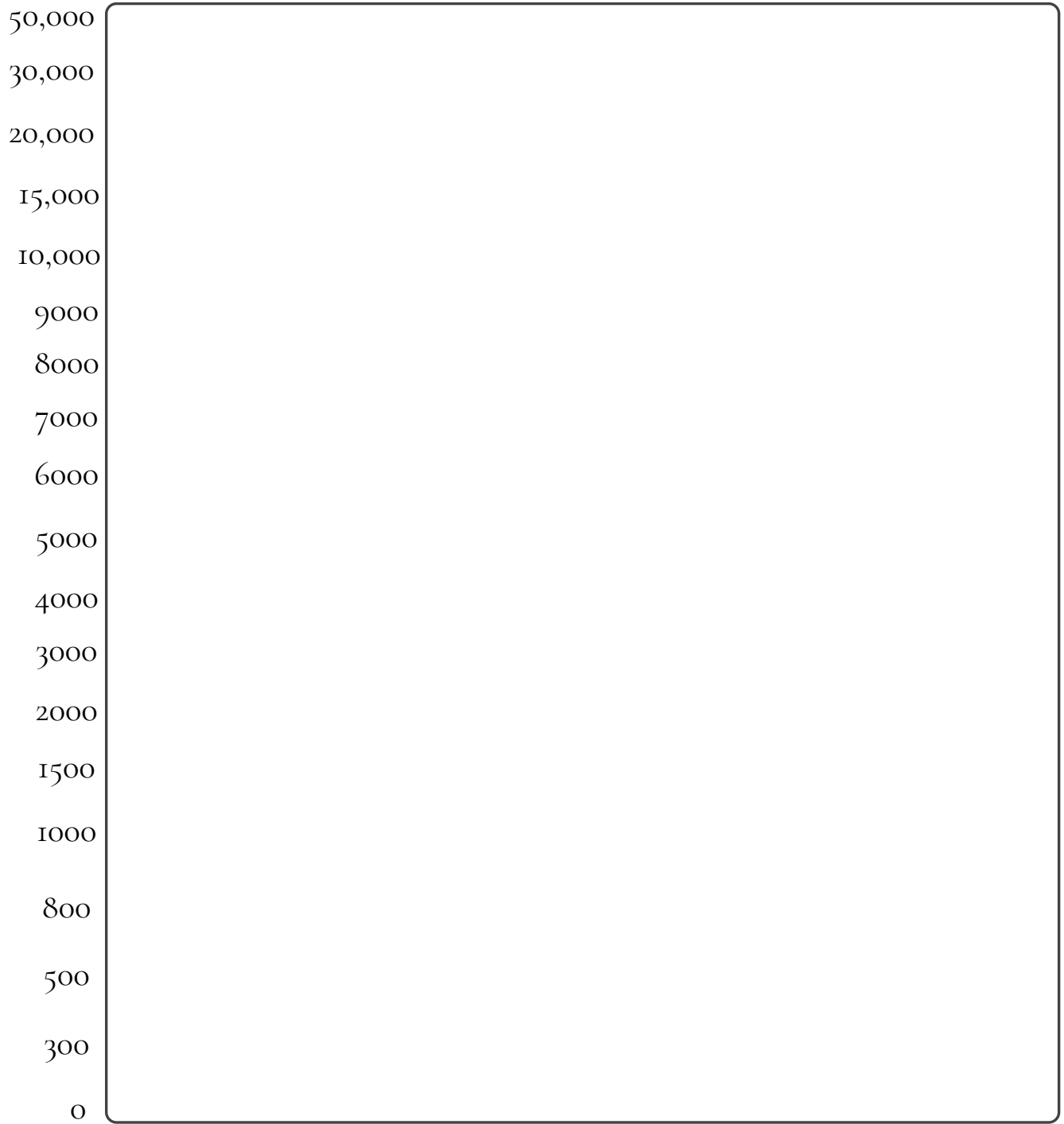
*what steps do i need to make?*

*Goal*

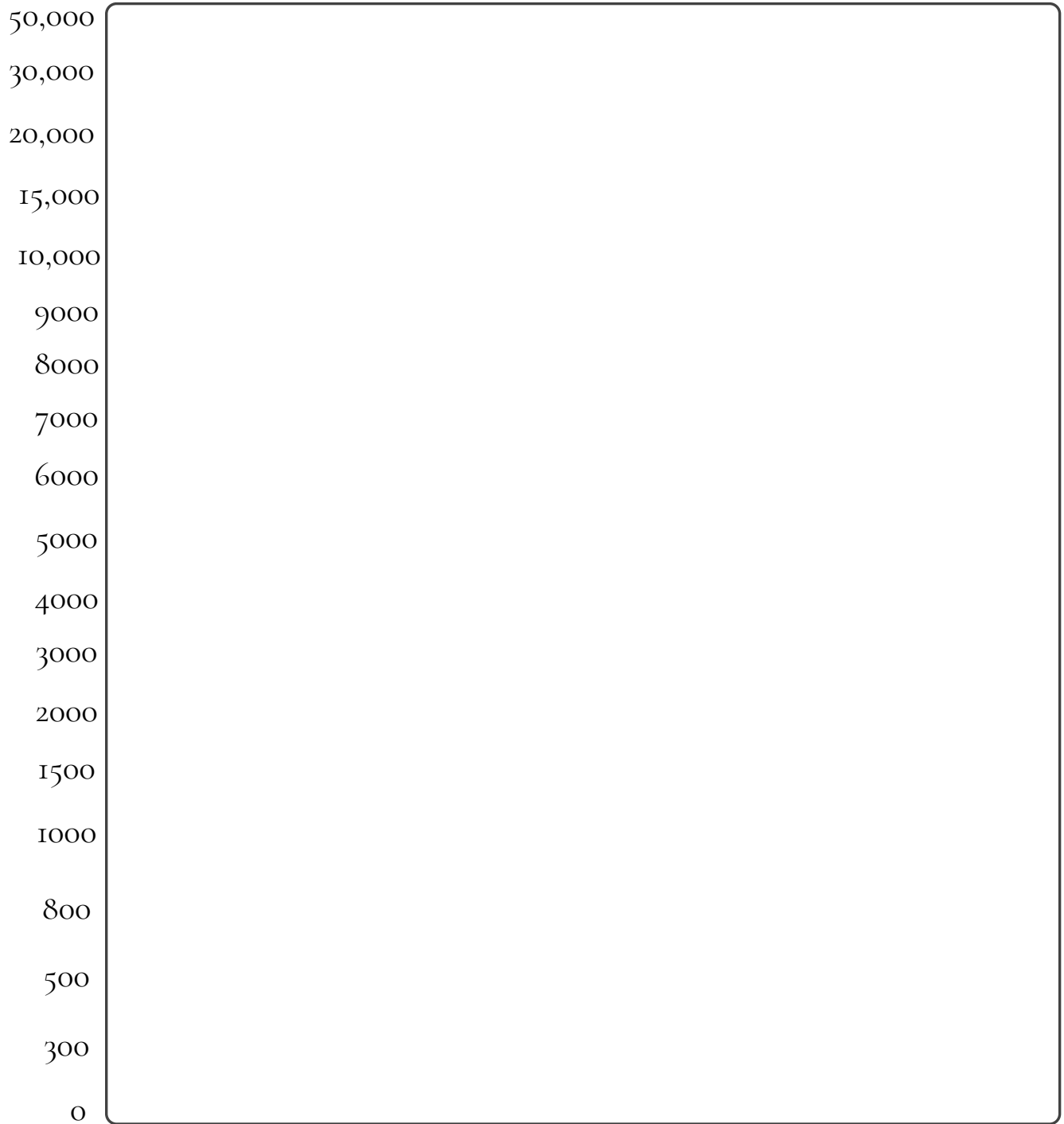
*Why is this important?*

*what steps do i need to make?*

# Savings Tracker



# Debt Payoff Tracker



# Credit Score Tracker

*Month*

*Score*


300-579: Poor  
580-669: Fair  
670-739: Good  
740-799: Very good  
800-850: Excellent

*Home Management*

# H o m e C o n t a c t s

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SERVICE  
PHONE  
NAME  
ADDRESS  
EMAIL

SERVICE  
PHONE  
NAME  
ADDRESS  
EMAIL

SERVICE  
PHONE  
NAME  
ADDRESS  
EMAIL

SERVICE  
PHONE  
NAME  
ADDRESS  
EMAIL

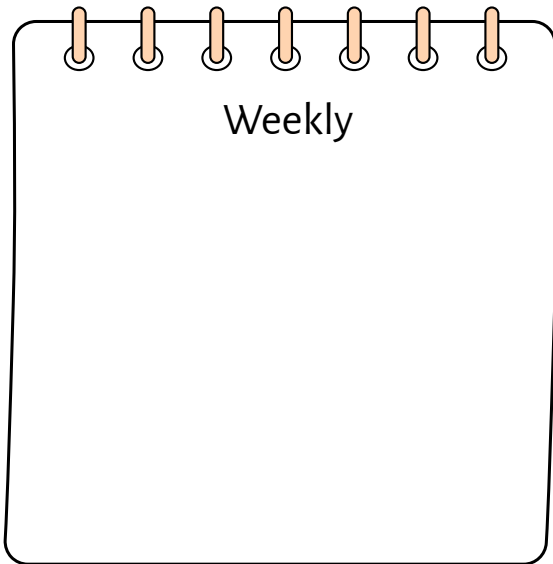
SERVICE  
PHONE  
NAME  
ADDRESS  
EMAIL

SERVICE  
PHONE  
NAME  
ADDRESS  
EMAIL

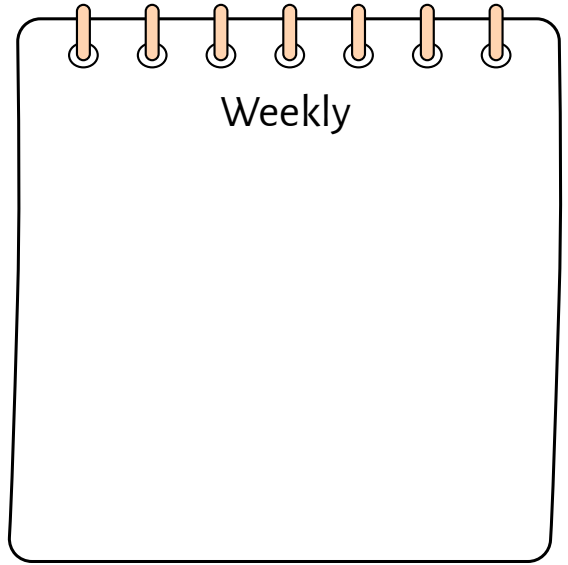
SERVICE  
PHONE  
NAME  
ADDRESS  
EMAIL

SERVICE  
PHONE  
NAME  
ADDRESS  
EMAIL

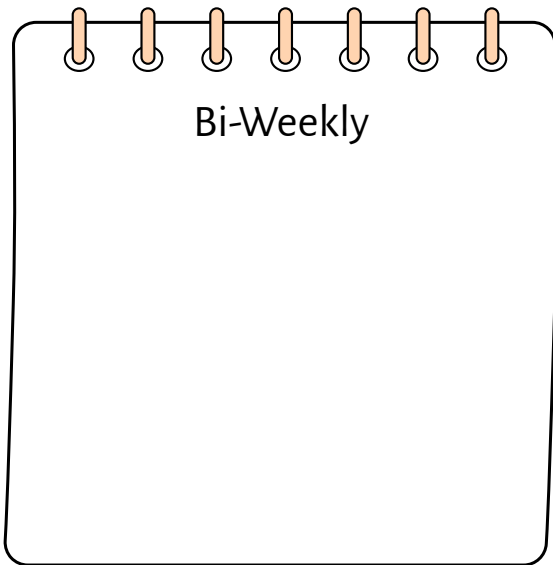
# Home Maintenance



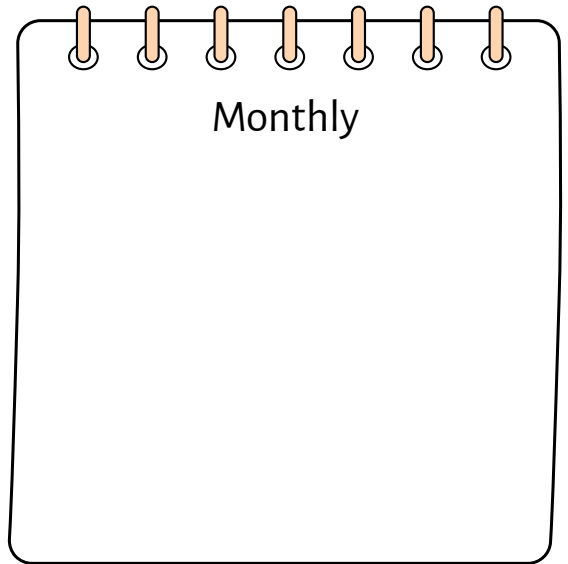
Weekly



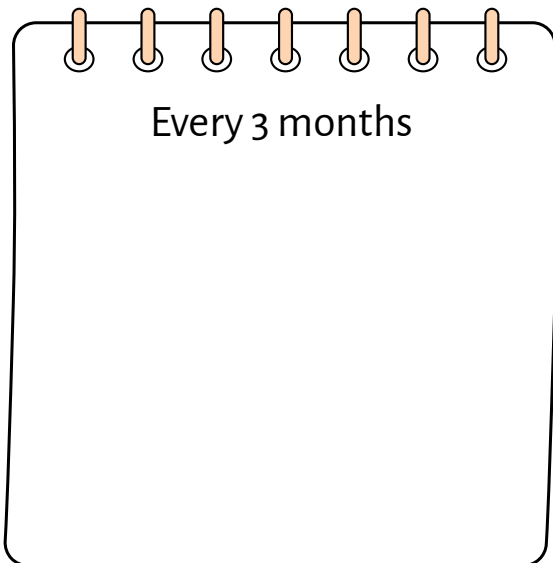
Weekly



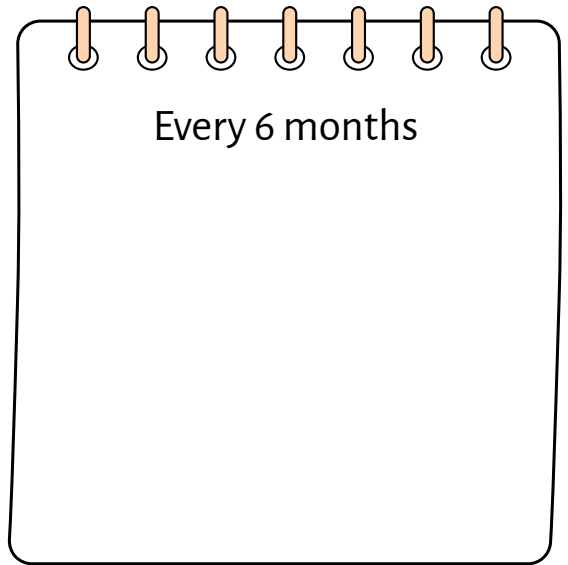
Bi-Weekly



Monthly



Every 3 months



Every 6 months

# Cleaning Chore Chart Per Room

Kitchen

Living Room

Master Bedroom

Master Bathroom

# Cleaning Chore Chart Per Room

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# Monthly Cleaning Schedule:

S M T W T F S


# Home Project To Do Lists

Supplies Needed

Supplies Needed

Supplies Needed

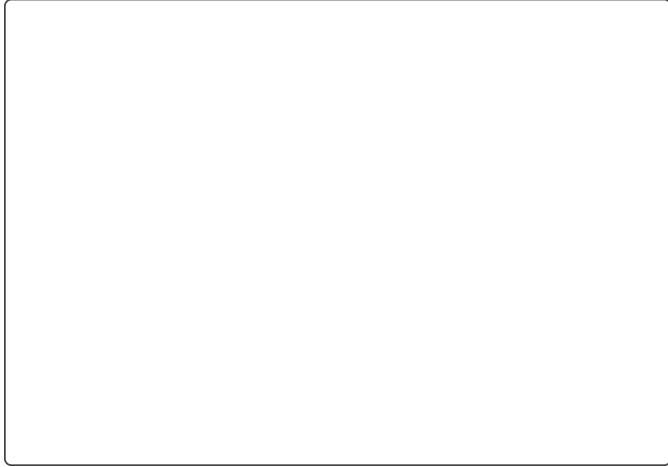
Supplies Needed



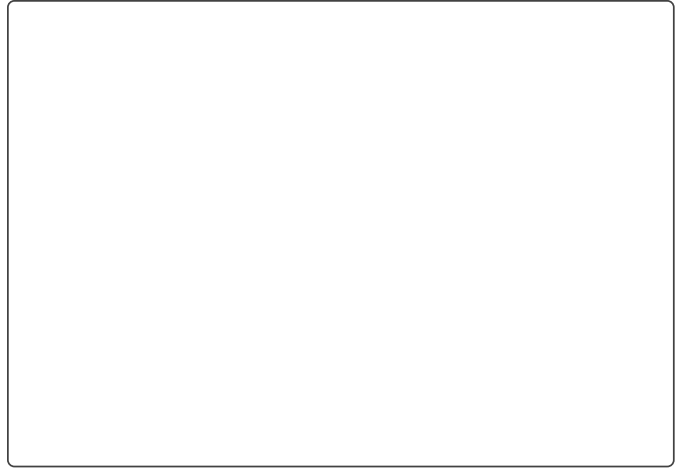
# Meal Planner

# Grocery List

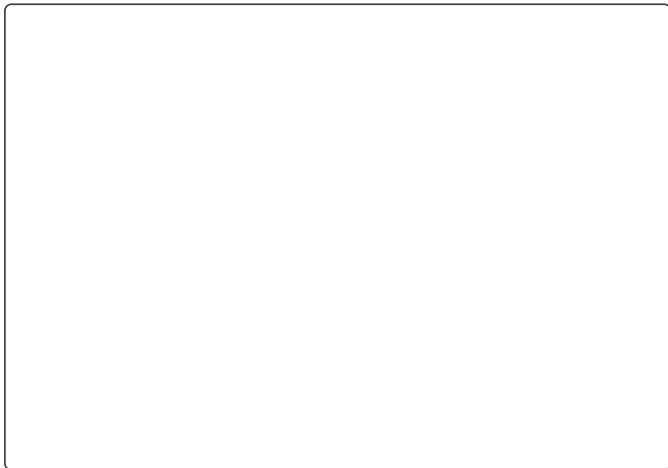
*dairy*



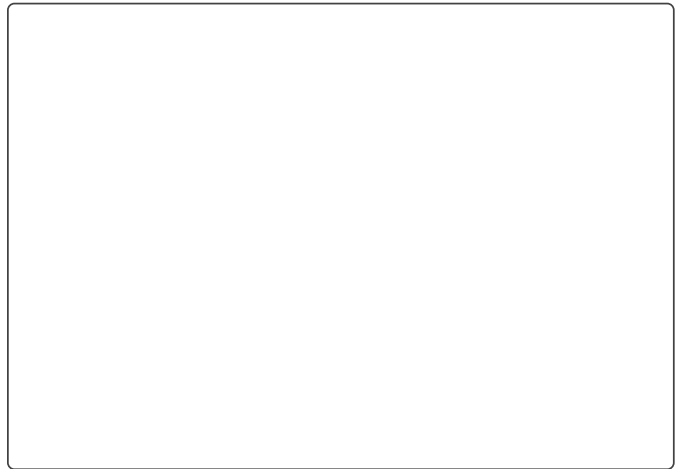
*produce*



*meat*




*pantry*



*sundries*



*misc.*



# Monthly Meal Planner:

S M T W T F S
































*Important Records*

# In Case of Emergency

Our address:

Emergency Meetup Place:

Closest Hospital:

Our Pharmacy:

Family member phone numbers:

Close by family:

Emergency pet care:

Family allergies & medical care:

Medical  
Insurance:

Auto  
Insurance:

Home  
Insurance:

# Vehicle Information

YEAR, MAKE, & MODEL:

PURCHASED ON:

VIN #:

NEED TO KNOW INFO:

YEAR, MAKE, & MODEL:

PURCHASED ON:

VIN #:

NEED TO KNOW INFO:

YEAR, MAKE, & MODEL:

PURCHASED ON:

VIN #:

NEED TO KNOW INFO:

YEAR, MAKE, & MODEL:

PURCHASED ON:

VIN #:

NEED TO KNOW INFO:

# Passports and ID's

FAMILY MEMBER:  
PASSPORT INFO:  
SOCIAL SECURITY #:  
DRIVERS LICENSE #:  
DL ISS DATE:  
DL EXP DATE:

FAMILY MEMBER:  
PASSPORT INFO:  
SOCIAL SECURITY #:  
DRIVERS LICENSE #:  
DL ISS DATE:  
DL EXP DATE:

FAMILY MEMBER:  
PASSPORT INFO:  
SOCIAL SECURITY #:  
DRIVERS LICENSE #:  
DL ISS DATE:  
DL EXP DATE:

FAMILY MEMBER:  
PASSPORT INFO:  
SOCIAL SECURITY #:  
DRIVERS LICENSE #:  
DL ISS DATE:  
DL EXP DATE:

# Previous Addresses

ADDRESS:  
DATES:

ADDRESS:  
DATES:

ADDRESS:  
DATES:

ADDRESS:  
DATES:

ADDRESS:  
DATES:

ADDRESS:  
DATES:

ADDRESS:  
DATES:

# Previous Work History

COMPANY:  
POSITION:  
DATES WORKED:  
SALARY:  
PHONE:  
ADDRESS:  
BOSS NAME:

COMPANY:  
POSITION:  
DATES WORKED:  
SALARY:  
PHONE:  
ADDRESS:  
BOSS NAME:

COMPANY:  
POSITION:  
DATES WORKED:  
SALARY:  
PHONE:  
ADDRESS:  
BOSS NAME:

COMPANY:  
POSITION:  
DATES WORKED:  
SALARY:  
PHONE:  
ADDRESS:  
BOSS NAME:

# Certificates & Licenses

CERTIFICATE:  
YEAR AWARDED:  
EXPIRES:  
NEED TO KNOW INFO:

CERTIFICATE:  
YEAR AWARDED:  
EXPIRES:  
NEED TO KNOW INFO:

CERTIFICATE:  
YEAR AWARDED:  
EXPIRES:  
NEED TO KNOW INFO:

CERTIFICATE:  
YEAR AWARDED:  
EXPIRES:  
NEED TO KNOW INFO:

# School Transcripts

FAMILY MEMBER:  
SCHOOL NAME & INFO:  
DATES ATTENDED:  
GRADUATION DATE:  
GPA:  
NEED TO KNOW INFO:

FAMILY MEMBER:  
SCHOOL NAME & INFO:  
DATES ATTENDED:  
GRADUATION DATE:  
GPA:  
NEED TO KNOW INFO:

FAMILY MEMBER:  
SCHOOL NAME & INFO:  
DATES ATTENDED:  
GRADUATION DATE:  
GPA:  
NEED TO KNOW INFO:

FAMILY MEMBER:  
SCHOOL NAME & INFO:  
DATES ATTENDED:  
GRADUATION DATE:  
GPA:  
NEED TO KNOW INFO:

# Wills, Medical Directives, POA's

FAMILY MEMBER:  
POWER OF ATTORNEY:  
NEED TO KNOW INFO:

FAMILY MEMBER:  
POWER OF ATTORNEY:  
NEED TO KNOW INFO:

FAMILY MEMBER:  
POWER OF ATTORNEY:  
NEED TO KNOW INFO:

FAMILY MEMBER:  
POWER OF ATTORNEY:  
NEED TO KNOW INFO:

# Tax Information

TAX YEAR:  
AGI:  
REFUND/TAXES DUE:  
NEED TO KNOW INFO:

TAX YEAR:  
AGI:  
REFUND/TAXES DUE:  
NEED TO KNOW INFO:

TAX YEAR:  
AGI:  
REFUND/TAXES DUE:  
NEED TO KNOW INFO:

TAX YEAR:  
AGI:  
REFUND/TAXES DUE:  
NEED TO KNOW INFO:

# Pet Records

PET NAME:  
BREED:  
BIRTHDAY:  
MEDICAL ISSUES:  
NEED TO KNOW INFO:

PET NAME:  
BREED:  
BIRTHDAY:  
MEDICAL ISSUES:  
NEED TO KNOW INFO:

PET NAME:  
BREED:  
BIRTHDAY:  
MEDICAL ISSUES:  
NEED TO KNOW INFO:

PET NAME:  
BREED:  
BIRTHDAY:  
MEDICAL ISSUES:  
NEED TO KNOW INFO:

