# JUST IN CASE BOOK Compiled by Walter L. Russell







6650 Walnut St. New Albany, OH 43054 614.855.6538

### WE ORCHESTRATE A TEAM OF EXPERTS IN ALL AREAS OF PERSONAL FINANCE TO HELP OUR CLIENTS:

We get clients entire financial house in order and we will work to keep it that way forever.

Clients will enjoy a high level of confidence that they will achieve their goals.

Align all financial decisions with their most important goals and their most deeply held values.

## **FINANCIAL PLANNING PROCESS**

### STEP 01

#### Cash

12 month Liquid net worth

Debt Reduction

**Budget Analysis** 

# Protection

STEP 02

Life Insurance

**Group Benefits** 

Long Term Care

Disability Insurance

### STEP 03 Estate/Tax Management

Wills, Trust Probate Avoidance

Taxable, Tax Deferred, and Tax Free

#### **STEP 04**

### Asset Management

Retirement Planning

Dividend and Interest

Conservative vs. Growth Investments

## WALTER RUSSELL TRUSTED ADVISOR OVER 20 YEARS EXPERIENCE

"As your Trusted Advisor I can act as your financial planner and money manager while working with your Tax Advisor, Attorney, and Insurance Agent to make sure all aspects of your financial future are working together."

Securities offered through Kestra Investment Services, LLC (Kestra IS), member FINRA/SIPC. Investment advisory services offered through Kestra Advisory Services, LLC (Kestra AS), an affiliate of Kestra IS. Russell & Associates is not affiliated with Kestra IS or Kestra AS.

# **JUST IN CASE BOOK**

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## **PERSONAL INFORMATION**

(you, spouse, children, parents)

Name	Current address	
Home phone	Work phone	Cell phone
All email addresses		
Office address		Office contact name and phone
Birthdate	Birthplace	Anniversary
SSN	 DL #	
Name	Current address	
Home phone	Work phone	Cell phone
All email addresses		
Office address		Office contact name and phone
Birthdate	Birthplace	Anniversary
SSN	DL #	
News	Current address	
Name	Current address	
Home phone	Work phone	Cell phone
All email addresses		
Office address		Office contact name and phone
Birthdate	Birthplace	Anniversary
SSN	DL #	
Name	Current address	
Home phone	Work phone	Cell phone
All email addresses		
Office address		Office contact name and phone
Birthdate	Birthplace	Anniversary
SCN	DI #	

## **EMERGENCY PLAN**

Meeting location 1

Meeting location 2

Emergency grab list

 Water shutdown location
 Gas shutdown location
 Fire extinguisher

 Smoke detectors
 Burgular alarm Code
 Alarm company contact

 Emergency water location
 Emergency food location
 Emergency cash location

Emergency contact name	Relationship	Phone number(s)	
Address			
Emergency contact name	Relationship	Phone number(s)	
Address			
Emergency contact name	Relationship	Phone number(s)	

## PASSWORDS AND LOGINS

Website	ID	Password
Website		
Website	ID	Password
Website		
		P
Website	ID	Password
Website	ID	Password
Website	ID	Password
Website	ID	Password
Website	ID	Password
Website	ID	Password
	-	
Wahaita		Pageward
Website	ID	Password
Website	ID	Password

## DATA BACKUP PLANS

### (services, thumb drives, external hard drives, DVDs, etc.)

Туре	Description	ID/Login (if needed)	Password	Location
U				
How to restore				
Туре	Description	ID/Login (if needed)	Password	Location
How to restore				
Туре	Description	ID/Login (if needed)	Password	Location
How to restore				
Туре	Description	ID/Login (if needed)	Password	Location
How to restore				
Туре	Description	ID/Login (if needed)	Password	Location
How to restore				
Туре	Description	ID/Login (if needed)	Password	Location
How to restore				
Туре	Description	ID/Login (if needed)	Password	Location
How to restore				
Туре	Description	ID/Login (if needed)	Password	Location
How to restore				

## **GROUPS AND ORGANIZATIONS**

(clubs, professional organizations, civic groups, etc.)

Groups name		Contact name	Contact phone/email	
Membership level	Awards received		Member since	Membership number
Groups name		Contact name	Contact phone/email	
Membership level	Awards received		Member since	Membership number
Groups name		Contact name	Contact phone/email	
Membership level	Awards received		Member since	Membership number
Groups name		Contact name	Contact phone/email	
Membership level	Awards received		Member since	Membership number
Groups name		Contact name	Contact phone/email	
Membership level	Awards received		Member since	Membership number
Groups name		Contact name	Contact phone/email	
Membership level	Awards received		Member since	Membership number
Groups name		Contact name	Contact phone/email	
Membership level	Awards received		Member since	Membership number
Groups name		Contact name	Contact phone/email	
Membership level	Awards received		Member since	Membership number
Groups name		Contact name	Contact phone/email	

## **BANK ACCOUNTS**

Туре	Institution		Account number	
Owners of account		Institution contact info		
Statements sent to (physical	address or email address)		Automated payments from	
Location of checks and used	checkbooks	ATM and debit cards for acc	count	ATM PIN
Туре	Institution		Account number	
Owners of account		Institution contact info		
Statements sent to (physical	address or email address)		Automated payments from	
Location of checks and used	checkbooks	ATM and debit cards for acc	count	ATM PIN
Туре	Institution		Account number	
Owners of account		Institution contact info		
Statements sent to (physical	address or email address)		Automated payments from	
Location of checks and used	checkbooks	ATM and debit cards for acc	count	ATM PIN
Туре	Institution		Account number	
Owners of account		Institution contact info		
Statements sent to (physical	address or email address)		Automated payments from	
Location of checks and used	checkbooks	ATM and debit cards for acc	count	ATM PIN

## **ACCOUNT NUMBERS**

### (Utilities, Mortgage, Cable, Lawn, Cell Phone, Cleaning, etc.)

Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website
Account type	Account number	Company	Phone	Website

## **PREVIOUS ADDRESSES**

Street			City
State	Zip	Dates Lived There	Notes
Street			City
State	Zip	Dates Lived There	Notes
Jiale	Ζιρ	Dates Lived There	Notes
Street			City
State	Zip	Dates Lived There	Notes
Street			City
State	Zip	Dates Lived There	Notes
Street			City
State	Zip	Dates Lived There	Notes
State	Zip	Dates Lived There	Notes
State	Zip	Dates Lived There	Notes
State Street	Zip	Dates Lived There	Notes
	Zip		
	Zip	Dates Lived There	
Street			City
Street State			City Notes
Street			City
Street State	Zip		City Notes
Street State Street		Dates Lived There	City Notes City
Street State Street	Zip	Dates Lived There	City Notes City
Street State Street	Zip	Dates Lived There	City Notes City
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## LIFE INSURANCE POLICIES

### (includes AD&D and LTD)

Who	Policy holder	Policy number	Policy amount
Policy holder contact info	ormation		Beneficiaries
Who	Policy holder	Policy number	Policy amount
Policy holder contact info	ormation		Beneficiaries
Who	Policy holder	Policy number	Policy amount
Policy holder contact info	ormation		Beneficiaries
Who	Policy holder	Policy number	Policy amount
Policy holder contact info	ormation		Beneficiaries
,			
Who	Policy holder	Policy number	Policy amount
Who	Policy holder	Policy number	Policy amount
		Policy number	Policy amount Beneficiaries
Who Policy holder contact info		Policy number	
		Policy number	
		Policy number Policy number	
Policy holder contact info	ormation		Beneficiaries
Policy holder contact info	Policy holder		Beneficiaries
Policy holder contact info	Policy holder		Beneficiaries Policy amount
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Policy holder contact info	Policy holder Policy holder Policy holder Policy holder Policy holder Policy holder	Policy number Policy number	Beneficiaries   Policy amount   Beneficiaries   Policy amount   Beneficiaries
Policy holder contact info	Policy holder Policy holder Policy holder Policy holder Policy holder Policy holder	Policy number Policy number	Beneficiaries Policy amount Beneficiaries Policy amount Beneficiaries

## HEALTH INSURANCE POLICIES

### (includes Dental and Prescription Drugs)

Who covered	Insurer	Policy number	Policy contact information	
Co Pay amount	Website		Cost/month	Network
Who covered	Insurer	Policy number	Policy contact information	
Co Pay amount	Website		Cost/month	Network
Who covered	Insurer	Policy number	Policy contact information	
Co Pay amount	Website		Cost/month	Network
Who covered	Insurer	Policy number	Policy contact information	
Co Pay amount	Website		Cost/month	Network
Who covered	Insurer	Policy number	Policy contact information	
Co Pay amount	Website		Cost/month	Network
Who covered	Insurer	Policy number	Policy contact information	
				N
Co Pay amount	Website		Cost/month	Network
Who covered	Insurer	Policy number	Policy contact information	
Who covered	Insurer	Policy number	Policy contact information	
Who covered Co Pay amount	Insurer Website	Policy number	Policy contact information Cost/month	Network
		Policy number		
Co Pay amount	Website		Cost/month	Network
		Policy number Policy number		Network
Co Pay amount Who covered	Website		Cost/month Policy contact information	Network
Co Pay amount	Website		Cost/month	Network

## CAR INSURANCE

Insurer	Drivers covered	Car make/model	Policy number	Contact information
Coverage		Deductibles		\$ deductions

Insurer	Drivers covered	Car make/model	Policy number	Contact information
Coverage		Deductibles		\$ deductions

Insurer	Drivers covered	Car make/model	Policy number	Contact information
Coverage	<u> </u>	Deductibles	<u> </u>	\$ deductions

Insurer	Drivers covered	Car make/model	Policy number	Contact information
Coverage		Deductibles		\$ deductions

## HOMEOWNER/RENTERS INSURANCE

Insurer	Location insured	Policy number
Contact information		Deductible
Items explicitly covered		
Policy notes		
Insurer	Location insured	Policy number
Contact information		Deductible
Items explicitly covered		
Policy notes		

## **MEDICAL HISTORY**

### (Yourself and Immediate Family), Including Allergies

Who     Approx date     Condition/Illness     Notes/results       Who     Approx date     Condition/Illness     Notes/results	r			
WhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/resultsWhoApprox dateCondition/IllnessNotes/results	Who	Approx date	Condition/illness	Notes/results
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Who         Approx date         Condition/illness         Notes/results				
Who         Approx date         Condition/illness         Notes/results				
	Who	Approx date	Condition/illness	Notes/results

## **PRESCRIPTION MEDICATION**

Who	Medication	Dosage	Prescribing Doctor
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Who	Medication	Dosage	Prescribing Doctor
		Dobage	
Who	Medication	Dosage	Prescribing Doctor
Who	Medication	Dosage	Prescribing Doctor
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Who	Medication	Dosage	Prescribing Doctor
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Who	Medication	Dosage	Prescribing Doctor
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Who Who Who Who	Medication Medication Medication Medication	Dosage Dosage Dosage Dosage Dosage Dosage	Prescribing Doctor Prescribing Doctor Prescribing Doctor Prescribing Doctor Prescribing Doctor

## EXTENDED FAMILY MEDICAL HISTORY

Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details

## LONG TERM HEALTH CARE DIRECTIONS

(Self and Immediate Family)

Who	Situation	Care desired
Who	Situation	Care desired
	Citeration	Come de time d
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired Care desired
Who	Situation	Care desired
Who	Situation	Care desired

## ORGANS, TISSUE, AND BODY DONATION

(Self and Immediate Family)

Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate

## FINAL ARRANGEMENTS

Who	Date updated	Time on life sup	port? DNR?	Institution to handle arrangements
Casket/container type	Open/closed?	Embalmed?	Burial/cremation?	Where interred?
Who performs ceremony?		Pallbearers?		
Grave/Memorial marker de	etails	Ceremony speak	xers S	pecial music, notes, food, or drink?
Where flowers/donations s	should be sent		L	ocation of will
Other notes about final arr	rangements			

Who	Date updated	Time on life sup	oport? DNR?	Institution to handle	arrangements
Casket/container type	Open/closed?	Embalmed?	Burial/cremation?	Where interred?	
Who performs ceremony	?	Pallbearers?			
Grave/Memorial marker o	details	Ceremony spea	kers	Special music, notes, food, or	drink?
Where flowers/donations	should be sent			Location of will	
Other notes about final a	rrangements				

### **EULOGY NOTES** (milestones of your life to help with any eulogy)

Notes

#### Who

Notes

## **PERSONAL LETTERS**

Place any letters to loved ones in a pouch or page protector here.

### These letters are typically opened upon the death of the writer. Be sure to update these letters on a regular basis.

Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?
Author	Date of letter	Who is the letter for?

## ESTATE PLANS AND GIFTS

	Who	Will location	Executor of will	Trust location	Trustees
	Who	Will location	Executor of will	Trust location	Trustees
L					
	ltem			Who should receive this?	
	What circumstances (death	n of self, spouse, or both)		Estimated Value	Date
	ltem			Who should receive this?	
	What circumstances (death	n of self, spouse, or both)		Estimated Value	Date
Г					
	ltem			Who should receive this?	
	What circumstances (death	n of self, spouse, or both)		Estimated Value	Date
Г	ltem			Who should receive this?	
	item			who should receive this:	
	What circumstances (death	n of self, spouse, or both)		Estimated Value	Date
L					
Γ	ltem			Who should receive this?	
		<i>. . . . . . . . . .</i>			
	What circumstances (death	n of selt, spouse, or both)		Estimated Value	Date
	ltem			Who should receive this?	
	What circumstances (death	of self spouse or beth		Estimated Value	Date
	what circumstances (death	i oi sell, spouse, or both)			

## OTHER CONTACTS IN CASE OF DEATH

#### **COMPANY BENEFITS DEPARTMENT**

Company		HR phone number	Employee number	Notes
INSURANCE COMP	ANY			
Company	Contact number	Policy number	Agent name	Notes
	ANY			
Company	Contact number	Policy number	Agent name	Notes
	ANY			
Company	Contact number	Policy number	Agent name	Notes

#### SOCIAL SECURITY ADMINISTRATION

SSN	Contact number	Notes	
	800-772-1213		

#### **VETERANS ADMINISTRATION**

SSN	Contact number	Notes	
	800-827-1000		

#### **PENSION PLAN**

Company	Contact number	Account number	Notes

#### **PENSION PLAN**

Company	Contact number	Account number	Notes

#### PENSION PLAN

	Company	Contact number	Account number	Notes
L				

#### CREDIT BUREAUS (VERIFY ADDRESSES) (SEND COPIES OF DEATH CERTIFICATES)

Equifax	Experian	TransUnion
PO Box 105069, Atlanta, GA 30348	PO Box 9530, Allen, TX 75013	PO Box 6790, Fullerton, CA 92634

## FUNERAL RELATED EXPENSES AND RECEIPTS

Keep all funeral related expenses and receipts in a pouch or page protector on this page.

## INVESTMENTS

### (including mutual funds, annuities, and stocks)

Туре	Name		Account number	
Contact info		Location of information	Value	Date
Туре	Name		Account number	
Contact info		Location of information	Value	Date
Туре	Name		Account number	
Contact info		Location of information	Value	Date
Туре	Name		Account number	
Contact info		Location of information	Value	Date
Туре	Name		Account number	
Туре	Name		Account number	
Type Contact info	Name	Location of information	Account number Value	Date
	Name			Date
	Name	Location of information		Date
Contact info		Location of information	Value	Date
Contact info		Location of information	Value	Date
Contact info Type		Location of information	Value Account number	
Contact info Type		Location of information	Value Account number	
Contact info Type Contact info	Name	Location of information	Value Account number Value	
Contact info Type Contact info	Name	Location of information	Value Account number Value	
Contact info Type Contact info Type	Name	Location of information	Value Account number Value Account number	Date
Contact info Type Contact info Type	Name	Location of information	Value Account number Value Account number	Date
Contact info Type Contact info Type Contact info	Name	Location of information	Value Account number Value Account number Value Value Value Value	Date
Contact info Type Contact info Type Contact info	Name	Location of information	Value Account number Value Account number Value Value Value Value	Date

## **OTHER ASSETS**

(Savings bonds, stock options, etc.)

Туре	Name		Account number	
Contact info		Location of information	Value	Date
Туре	Name		Account number	
Contact info		Location of information	Value	Date
Туре	Name		Account number	
Contact info		Location of information	Value	Date
Туре	Name		Account number	
Contact info		Location of information	Value	Date
Туре	Name		Account number	
Contact info		Location of information	Value	Date
Contact info	Name	Location of information	Value Account number	Date
	Name	Location of information		Date
	Name	Location of information		Date Date
Туре	Name		Account number	
Type Contact info			Account number Value	
Type Contact info			Account number Value	
Type Contact info Type		Location of information	Account number Value Account number	Date
Type Contact info Type Contact info	Name	Location of information	Account number Value Account number Value	Date

## **RETIREMENT PLANS**

(401k, pensions, IRAs, etc.)

Туре	Name	A	ccount number	
Contact info		Location of information	Value	Date
Туре	Name	A	ccount number	
Contact info		Location of information	Value	Date
Туре	Name	A	ccount number	
Contact info		Location of information	Value	Date
Туре	Name	A	ccount number	
Contact info		Location of information	Value	Date
Туре	Name	A	ccount number	
Туре	Name	A	ccount number	
Type Contact info	Name	A Location of information	ccount number Value	Date
	Name			Date
	Name	Location of information		Date
Contact info		Location of information	Value	Date
Contact info		Location of information	Value	Date
Contact info Type		Location of information	Value ccount number	
Contact info Type		Location of information	Value ccount number	
Contact info Type Contact info	Name	Location of information	Value ccount number Value	
Contact info Type Contact info	Name	Location of information	Value ccount number Value	
Contact info Type Contact info Type Type	Name	Location of information A Location of information	Value ccount number Value ccount number	Date
Contact info Type Contact info Type Type	Name	Location of information	Value ccount number Value ccount number	Date
Contact info Type Contact info Type Contact info	Name	Location of information	Value Ccount number Value Ccount number Value Value Value	Date
Contact info Type Contact info Type Contact info	Name	Location of information	Value Ccount number Value Ccount number Value Value Value	Date

## **PRIVATE BUSINESS**

Туре	Name of company		Position in company SSN/FEIN			
Partner name		Partner contac	ct info			
Partner name		Partner contac	ct info			
Name of bank	Ba	nk account number		Credit card number (s)		
PIN	Bank url	Banl	website ID	Bank website password	d	
Domain name reg	Account ID	Password	Webhost	Account ID	Password	
Email url	Email address	PW	Other website	ID	Password	
Other website	ID	PW	Other website	ID	Password	
Other website	ID	PW	Other website	ID	Password	
NOTES						

## **REAL ESTATE**

Location	Туре	Date	Est Value
Mortgage holder	Mortgage acct num		Lender contact info
Property taxes	Location of paperwork		
Notes			

Location	Туре	Date	Est Value
Mortgage holder	Mortgage acct num	Lender contact	: info
Property taxes	Location of paperwork		
Notes			

Location	Туре	Date	Est Value
Mortgage holder	Mortgage acct num		Lender contact info
Property taxes	Location of paperwork		
Notes			

NOTES

## SAFES, STORAGE UNITS, PO BOXES, SAFETY DEPOSIT BOXES, ETC.

Туре	Location	Combination	Key location
What is stored within?			Date Closed
Туре	Location	Combination	Key location
What is stored within?			Date Closed
Туре	Location	Combination	Key location
What is stored within?			Date Closed
Tura	Location	Combination	Kaulaastian
Туре	Location	Combination	Key location
What is stored within?			Date Closed
Туре	Location	Combination	Key location
What is stored within?			Date Closed
Туре	Location	Combination	Key location
What is stored within?			Date Closed
Туре	Location	Combination	Key location
What is stored within?			Date Closed
Туре	Location	Combination	Key location
What is stored within?			Date Closed

## VALUABLES INVENTORY

### (go room by room and look for things of value)

ltem	Туре	Model number	Color	Serial Number
Description		Location	Date	Est Value
ltem	Туре	Model number	Color	Serial Number
Description		Location	Date	Est Value
ltem	Туре	Model number	Color	Serial Number
Description		Location	Date	Est Value
ltem	Туре	Model number	Color	Serial Number
Description		Location	Date	Est Value
ltem	Туре	Model number	Color	Serial Number
Description		Location	Date	Est Value
ltem	Туре	Model number	Color	Serial Number
Description		Location	Date	Est Value
ltem	Туре	Model number	Color	Serial Number
Description		Location	Date	Est Value
ltem	Туре	Model number	Color	Serial Number
Description		Location	Date	Est Value

## AUTOMOBILES, MOTORCYCLES, BOATS, RVS, AND OTHER VEHICLES

Туре	Year	Make		Model		Color	VIN
License plate #	Location of spare	e key	Insurer		Policy	number	Odometer/hours
Notes							Date

Туре	Year	Make		Model		Color	VIN
License plate #	Location of spar	e key	Insurer		Policy	number	Odometer/hours
Notes							Date

Туре	Year	Make		Model		Color	VIN
License plate #	Location of spar	e key	Insurer		Policy	number	Odometer/hours
Notes							Date

Туре	Year	Make		Model		Color	VIN
License plate #	Location of spar	e key	Insurer		Policy	number	Odometer/hours
Notes							Date

Туре	Year	Make		Model		Color	VIN
License plate #	Location of spare	e key	Insurer		Policy	number	Odometer/hours
Notes							Date

## TAX ISSUES AND RECORDS

Tax Year	Location of forms		Name of	CPA CP	A contact information
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/re	f City tax paid/ref
Tax Year	Location of forms		Name of	СРА СР	A contact information
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/re	f City tax paid/ref
Tax Year	Location of forms		Name of	СРА СР	A contact information
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/re	f City tax paid/ref
Tax Year	Location of forms		Name of	CPA CP	A contact information
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/re	f City tax paid/ref
Tax Year	Location of forms		Name of	CPA CP	A contact information
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/re	f City tax paid/ref
Tax Year	Location of forms		Name of	CPA CP	A contact information
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/re	f City tax paid/ref
Tax Year	Location of forms		Name of	CPA CP	A contact information
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/re	f City tax paid/ref
Tax Year	Location of forms		Name of	CPA CP	A contact information
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/re	f City tax paid/ref

## LOAN OBLIGATIONS

Туре	Loaning institution	ı	Contact i	nfo	Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Туре	Loaning institution	ı	Contact i	nfo	Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Туре	Loaning institution	ı	Contact i	nfo	Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Туре	Loaning institution	ı	Contact i	nfo	Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Туре	Loaning institution	ı	Contact i	nfo	Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Туре	Loaning institution	ı	Contact i	nfo	Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Туре	Loaning institution	ı	Contact i	nfo	Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Туре	Loaning institution	1	Contact i	nfo	Paid off and date?
		-			
	g				
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date

## **CREDIT CARDS**

Type (Visa, MC, etc.)	Brand		Issuing ban	ık	Name on	card	
Card number			Exp date	Security	code	Cust service phone	
Card website		Website ID	W	Vebsite passwo	rd	Outside US customer	service phone #
Interest rate	Balance	С	redit limit		Date	Closed?	Date closed

Type (Visa, MC, etc.)	Brand		Issuing bank	:	Name on c	ard	
Card number			Exp date	Security	code	Cust service phone	
Card website		Website ID	We	ebsite passwoi	rd	Outside US customer	service phone #
Interest rate	Balance	С	Credit limit		Date	Closed?	Date closed

Type (Visa, MC, etc.)	Brand		Issuing bar	nk		Name on o	ard		
Card number			Exp date	Se	curity	code	Cust se	ervice phone	
Card website		Website ID	١	Website p	asswor	rd	Outside	e US customer	service phone #
Interest rate	Balance	С	Credit limit			Date		Closed?	Date closed

Type (Visa, MC, etc.)	Brand		lssuing ban	k	Name on o	card	
Card number			Exp date	Security	code	Cust service phone	
Card website		Website ID	v	Vebsite passwo	rd	Outside US customer	service phone #
Interest rate	Balance	C	Credit limit		Date	Closed?	Date closed

## **OTHER DEBTS**

Туре	Debt holder		Holder contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Originating date	Final payment date		Current balance	Date	Faid off (and date):
Notes					
Туре	Debt holder		Holder contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					
Notes					
Туре	Debt holder		Holder contact info		
Туре	Debt holder		Holder contact info		
Туре	Debt holder		Holder contact info		
Type Originating date	Debt holder Final payment date	Original debt amt	Holder contact info Current balance	Date	Paid off (and date)?
		Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
		Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
Originating date Notes	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
Originating date Notes	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Originating date Notes	Final payment date		Current balance		
Originating date Notes	Final payment date	Original debt amt Original debt amt	Current balance	Date	Paid off (and date)? Paid off (and date)?
Originating date Notes	Final payment date		Current balance		
Originating date Notes	Final payment date		Current balance		
Originating date Notes Type Originating date	Final payment date		Current balance		
Originating date Notes Type Originating date	Final payment date		Current balance		
Originating date Notes Type Originating date	Final payment date		Current balance		
Originating date Notes Type Originating date	Final payment date		Current balance		
Originating date Notes Type Originating date	Final payment date		Current balance		

## DEBTS AND OBLIGATIONS OWED TO YOU

Туре	Debtor		Debtor contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					
Туре	Debtor		Debtor contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
5 5		5			
Notes					
Туре	Debtor		Debtor contact info		
Туре	Debtor		Debtor contact info		
		Original debt amt	Debtor contact info Current balance	Date	Paid off (and date)?
Type Originating date	Debtor Final payment date	Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
		Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
Originating date		Original debt amt		Date	Paid off (and date)?
Originating date Notes	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Originating date Notes	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)? Paid off (and date)?
Originating date Notes	Final payment date		Current balance		
Originating date Notes	Final payment date		Current balance		
Originating date Notes Type Originating date	Final payment date		Current balance		





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