

**IMPORTANT  
HOUSEHOLD  
FINANCIAL  
RECORDS**



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# Bank Account Information

Nickname	
Account #	
Bank Name	
Phone #	
Address	
Website	
Username	
Password	
Debit or CC #	
Pin	
Debit or CC #	
Pin	

Nickname	
Account #	
Bank Name	
Phone #	
Address	
Website	
Username	
Password	
Debit or CC #	
Pin	
Debit or CC #	
Pin	

Nickname	
Account #	
Bank Name	
Phone #	
Address	
Website	
Username	
Password	
Debit or CC #	
Pin	
Debit or CC #	
Pin	

Nickname	
Account #	
Bank Name	
Phone #	
Address	
Website	
Username	
Password	
Debit or CC #	
Pin	
Debit or CC #	
Pin	

Nickname	
Account #	
Bank Name	
Phone #	
Address	
Website	
Username	
Password	
Debit or CC #	
Pin	
Debit or CC #	
Pin	

Nickname	
Account #	
Bank Name	
Phone #	
Address	
Website	
Username	
Password	
Debit or CC #	
Pin	
Debit or CC #	
Pin	



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# Safe Deposit, Bonds, & Certificates of Deposit

Bank Name			Website	
Address			City, State, ZIP	
Contact Person			Phone	
Email				
Checking Acct. #			Box Number:	
Savings Acct. #			Location of Key:	
User ID:				
Password:				
<b>Bond Term</b>	<b>Bond Amount</b>	<b>Start Date</b>	<b>Maturity Date</b>	<b>Notes</b>

Bank Name			Website	
Address			City, State, ZIP	
Contact Person			Phone	
Email				
Checking Acct. #			Box Number:	
Savings Acct. #			Location of Key:	
User ID:				
Password:				
<b>Bond Term</b>	<b>Bond Amount</b>	<b>Start Date</b>	<b>Maturity Date</b>	<b>Notes</b>

Bank Name			Website	
Address			City, State, ZIP	
Contact Person			Phone	
Email				
Checking Acct. #			Box Number:	
Savings Acct. #			Location of Key:	
User ID:				
Password:				
<b>Bond Term</b>	<b>Bond Amount</b>	<b>Start Date</b>	<b>Maturity Date</b>	<b>Notes</b>



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# Credit Card Information

Description	
Card Number	
Credit Limit	
Creditor	
Phone #	
Address	
Website	
Username	
Password	
Account #	

Description	
Card Number	
Credit Limit	
Creditor	
Phone #	
Address	
Website	
Username	
Password	
Account #	

Description	
Card Number	
Credit Limit	
Creditor	
Phone #	
Address	
Website	
Username	
Password	
Account #	

Description	
Card Number	
Credit Limit	
Creditor	
Phone #	
Address	
Website	
Username	
Password	
Account #	

Description	
Card Number	
Credit Limit	
Creditor	
Phone #	
Address	
Website	
Username	
Password	
Account #	

Description	
Card Number	
Credit Limit	
Creditor	
Phone #	
Address	
Website	
Username	
Password	
Account #	



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# Important Documents

## Personal Documents

Document	Location	Date Noted
Social Security Card		
Medicare Card		
Secondary Health Insurance Card		
Health Care Proxy		
Living Will / Advance Directive		
Power of Attorney		
Guardianship		
Conservator/ Representative Payee		
Life Insurance Policy		
Will		
Trust Information		
Military ID / Papers		

## Financial Documents

Document	Location	Date Noted
Loan Documents		
Annuity Contracts		
Stock Certificates & Bonds		



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# Personal Insurance

## Health Insurance #1

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Health Insurance #2

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Long-Term Insurance #1

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Long-Term Insurance #2

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Disability Insurance #1

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Disability Insurance #2

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	



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# Property Insurance

## Home Insurance #1

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Home Insurance #2

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Auto Insurance #1

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Auto Insurance #2

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Other Insurance #1

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	

## Other Insurance #2

Policy Number	
Agent Name	
Agency Name	
Phone	
Address	
State	
Zip	
Insurance Co.	
Website	
24-Hour Phone	



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# Important Contacts

## Attorney

Name	
Firm	
Address	
Address	
Phone #	
Email	
Notes:	

## Financial Advisor

Name	
Firm	
Address	
Address	
Phone #	
Email	
Notes:	

## Accountant

Name	
Firm	
Address	
Address	
Phone #	
Email	
Notes:	

