



# FINANCIAL JOURNAL

UPDATED ON: \_\_\_\_\_

*Compliments of:*

**Annemarie Schreiber, Esq.**

*Certified Elder Law Attorney*

and

**Joseph J. La Costa, Esq.**

*Attorney and CPA*

**Carluccio, Leone, Dimon,  
Doyle & Sacks, LLC**

———— **ATTORNEYS AT LAW** ————

Bankruptcy • Business/Corporate/Commercial Law • Business/Professional Practice Purchase & Sale • Criminal Defense  
Education Law • Elder Law • Employment Law • Family Law • Landlord/Tenant • Land Use & Zoning • Mediation & Arbitration  
Personal Injury/Wrongful Death • Real Estate • Tax Problem Resolution, Appeals & Relief

**732.797.1600**

9 Robbins St. Toms River, NJ | [www.CLDDS.com](http://www.CLDDS.com) | [info@cldds.com](mailto:info@cldds.com)

## PERSONAL INFORMATION

Name: \_\_\_\_\_ ☐ Married ☐ Partnership ☐ Single ☐ Widow/Widower

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Marriage Date: \_\_\_\_\_ Place of Marriage: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

*If Divorced* Date of Divorce Decree: \_\_\_\_\_ Court: \_\_\_\_\_

Military Service Branch: \_\_\_\_\_ Years Served: \_\_\_\_\_

☐ Will Date: \_\_\_\_\_ ☐ Advanced Medical Directive Date: \_\_\_\_\_

☐ Power of Attorney \_\_\_\_\_ Date: \_\_\_\_\_

Burial/Cremation Provision: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Medical Insurance

Provider: \_\_\_\_\_ ID Number: \_\_\_\_\_

Provider: \_\_\_\_\_ ID Number: \_\_\_\_\_

### Long Term Care Insurance

Provider: \_\_\_\_\_ ID Number: \_\_\_\_\_

### PHYSICIAN

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

### ATTORNEY

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

### ACCOUNTANT/ TAX PREPARER

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY CONTACTS** Persons to notify in case of death or illness

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# FINANCIAL INFORMATION

## BANK ACCOUNTS

☐ Checking ☐ Savings

☐ Money Market

☐ CD

Bank: \_\_\_\_\_

Branch Location: \_\_\_\_\_

Account Number: \_\_\_\_\_

Current Balance: \_\_\_\_\_

Location of Records of Ownership: \_\_\_\_\_

☐ Single ☐ Joint account held with: \_\_\_\_\_

☐ Checking ☐ Savings

☐ Money Market

☐ CD

Bank: \_\_\_\_\_

Branch Location: \_\_\_\_\_

Account Number: \_\_\_\_\_

Current Balance: \_\_\_\_\_

Location of Records of Ownership: \_\_\_\_\_

☐ Single ☐ Joint account held with: \_\_\_\_\_

☐ Checking ☐ Savings

☐ Money Market

☐ CD

Bank: \_\_\_\_\_

Branch Location: \_\_\_\_\_

Account Number: \_\_\_\_\_

Current Balance: \_\_\_\_\_

Location of Records of Ownership: \_\_\_\_\_

☐ Single ☐ Joint account held with: \_\_\_\_\_

☐ Checking ☐ Savings

☐ Money Market

☐ CD

Bank: \_\_\_\_\_

Branch Location: \_\_\_\_\_

Account Number: \_\_\_\_\_

Current Balance: \_\_\_\_\_

Location of Records of Ownership: \_\_\_\_\_

☐ Single ☐ Joint account held with: \_\_\_\_\_

☐ Checking ☐ Savings

☐ Money Market

☐ CD

Bank: \_\_\_\_\_

Branch Location: \_\_\_\_\_

Account Number: \_\_\_\_\_

Current Balance: \_\_\_\_\_

Location of Records of Ownership: \_\_\_\_\_

☐ Single ☐ Joint account held with: \_\_\_\_\_

## STOCKS

Name of Stock: _____	No. of Shares: _____
Date Purchased: _____	Approximate Value: _____
Name of Stock: _____	No. of Shares: _____
Date Purchased: _____	Approximate Value: _____
Name of Stock: _____	No. of Shares: _____
Date Purchased: _____	Approximate Value: _____
Name of Stock: _____	No. of Shares: _____
Date Purchased: _____	Approximate Value: _____
Name of Stock: _____	No. of Shares: _____
Date Purchased: _____	Approximate Value: _____
Name of Stock: _____	No. of Shares: _____
Date Purchased: _____	Approximate Value: _____
Name of Stock: _____	No. of Shares: _____
Date Purchased: _____	Approximate Value: _____
Name of Stock: _____	No. of Shares: _____
Date Purchased: _____	Approximate Value: _____

## BONDS

Type: _____	
Value: _____	Date Purchased: _____
Type: _____	
Value: _____	Date Purchased: _____
Type: _____	
Value: _____	Date Purchased: _____
Type: _____	
Value: _____	Date Purchased: _____
Type: _____	
Value: _____	Date Purchased: _____

## BROKER

Name: _____	Phone: _____
Address: _____	
_____	

## INSURANCE POLICY INFORMATION

Life Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Tel: \_\_\_\_\_

Value: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Life Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Tel: \_\_\_\_\_

Value: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Auto Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Tel: \_\_\_\_\_

Homeowner's Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Tel: \_\_\_\_\_

Other: \_\_\_\_\_

Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Tel: \_\_\_\_\_

## COMPANY BENEFITS: RETIREMENT & PENSIONS

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Retirement: \_\_\_\_\_ Profit Sharing: ☐ Yes ☐ No Pension Plan: ☐ Yes ☐ No

Annuity Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Address: \_\_\_\_\_

Current Value: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Notes: \_\_\_\_\_

---

---

---

---

---

---

---

## SAFE DEPOSIT BOX

Institution: \_\_\_\_\_ Location: \_\_\_\_\_

Institution: \_\_\_\_\_ Location: \_\_\_\_\_

## REAL ESTATE

Location: \_\_\_\_\_ Lot/Block: \_\_\_\_\_

Title: \_\_\_\_\_

Type: ☐ Fee Simple ☐ Co-op ☐ Condominium/Townhouse

Location: \_\_\_\_\_ Lot/Block: \_\_\_\_\_

Title: \_\_\_\_\_

Type: ☐ Fee Simple ☐ Co-op ☐ Condominium/Townhouse

## OUTSTANDING OBLIGATIONS

Type of Loan: \_\_\_\_\_ Account Number: \_\_\_\_\_

Lender: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Loan: \_\_\_\_\_ Account Number: \_\_\_\_\_

Lender: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Loan: \_\_\_\_\_ Account Number: \_\_\_\_\_

Lender: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Loan: \_\_\_\_\_ Account Number: \_\_\_\_\_

Lender: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Loan: \_\_\_\_\_ Account Number: \_\_\_\_\_

Lender: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_

# CREDIT CARDS

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_

Card Name: \_\_\_\_\_ Bank Holder: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Balance: \_\_\_\_\_