

INSURANCE PREMIUM PAYMENT ORGANIZER

Calendar Year: 20____

POLICY TYPE	PROVIDER / ID	PREMIUM	FREQ.	PAYMENT TRACKING (CHECK WHEN PAID)																			
				J	F	M	A	M	J	J	A	S	O	N	D								
Health Insurance	Blue Shield #123	\$450.00	Monthly																				
Auto Insurance	Geico #AX-90	\$820.00	Bi-Annual																				
Home/Renter	Lemonade #772	\$180.00	Annual																				
Life Insurance	MetLife #LP00	\$65.00	Monthly																				

Notes & Reminders: