

# BILL PAYMENT CHECKLIST

Never Miss a Payment • Stay Organized • Build Better Credit

 Month/Year: \_\_\_\_\_

 Total Budget: \$ \_\_\_\_\_

## Bill Payment Success Tips

### Organization

- Set up calendar reminders
- Use automatic payments for fixed bills
- Keep all bills in one place
- Review statements monthly

### Money Management

- Pay bills before other expenses
- Set up a separate bills account
- Track due dates carefully
- Pay high-interest debt first

 HOUSING & UTILITIES	AMOUNT	DUUE DATE	PAYMENT METHOD	PRIORITY	STATUS	NOTES
 Rent/Mortgage	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
 Electricity	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
 Gas/Heating	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
 Water/Sewer	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
 Trash/Recycling	\$ _____	_____	_____	MED	<input type="checkbox"/> Paid	_____
<b>HOUSING TOTAL</b>	\$ _____					

 COMMUNICATION & INTERNET	AMOUNT	DUUE DATE	PAYMENT METHOD	PRIORITY	STATUS	NOTES
 Phone/Mobile	\$ _____	_____	_____	MED	<input type="checkbox"/> Paid	_____
 Internet/Cable	\$ _____	_____	_____	MED	<input type="checkbox"/> Paid	_____

COMMUNICATION & INTERNET	AMOUNT	DUUE DATE	PAYMENT METHOD	PRIORITY	STATUS	NOTES
Streaming Services	\$ _____	_____	_____	LOW	<input type="checkbox"/> Paid	_____
<b>COMMUNICATION TOTAL</b>	<b>\$</b> _____					
FINANCIAL OBLIGATIONS	AMOUNT	DUUE DATE	PAYMENT METHOD	PRIORITY	STATUS	NOTES
Credit Card 1	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
Credit Card 2	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
Car Payment	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
Student Loan	\$ _____	_____	_____	MED	<input type="checkbox"/> Paid	_____
Personal Loan	\$ _____	_____	_____	MED	<input type="checkbox"/> Paid	_____
<b>FINANCIAL TOTAL</b>	<b>\$</b> _____					
INSURANCE & HEALTHCARE	AMOUNT	DUUE DATE	PAYMENT METHOD	PRIORITY	STATUS	NOTES
Health Insurance	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
Auto Insurance	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
Home/Renters Insurance	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
Life Insurance	\$ _____	_____	_____	MED	<input type="checkbox"/> Paid	_____
<b>INSURANCE TOTAL</b>	<b>\$</b> _____					

17 ANNUAL BILLS TRACKER	AMOUNT	DUUE DATE	PAYMENT METHOD	PRIORITY	STATUS	NOTES
 Tax Preparation	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
 Property Tax	\$ _____	_____	_____	HIGH	<input type="checkbox"/> Paid	_____
 Home Maintenance	\$ _____	_____	_____	MED	<input type="checkbox"/> Paid	_____
 Software Subscriptions	\$ _____	_____	_____	LOW	<input type="checkbox"/> Paid	_____
<b>ANNUAL TOTAL</b>	\$ _____					

## MONTHLY BILL SUMMARY

**Total Bills This Month**

\$ \_\_\_\_\_

**Bills Paid On Time**

\_\_\_\_\_ / \_\_\_\_\_

**Monthly Budget**

\$ \_\_\_\_\_

**Total Bills**

\$ \_\_\_\_\_

**Remaining Budget**

\$ \_\_\_\_\_



## PAYMENT NOTES & REMINDERS

**Payment Tips:** Set up automatic payments for fixed bills • Use calendar reminders • Pay credit cards before due dates • Review statements for errors • Keep payment confirmations

Financial Organization • Credit Score Protection • Peace of Mind