



pcs  
planner



*dates*

# Weekly Plan

Week Of  
:

Month  
:

Monday :

Tuesday :

Wednesday

Thursday

Friday

Saturday

Sunday

To Do :

Memo :

# MONTHLY PLANNER

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MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

PRIORITY

# DAILY PLAN

DATE

## TODAY'S SCHEDULE

6-7 AM	
7-8 AM	
8-9 AM	
9-10 AM	
10-11 AM	
11-12 AM	
12-1 PM	
1-2 PM	
2-3 PM	
3-4 PM	
4-5 PM	
6-7 PM	
7-8 PM	
8-9 PM	

## TOP PRIORITIES

Four horizontal bars for listing top priorities.

TO DO LIST..

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FOR TOMORROW..

NOTE..





*checklists*

# Checklist-

## On Receiving Orders

 CLEARLY WORK OUT YOUR INTENDED MOVE DATE. YOUR PLAN SHOULD REVOLVE AROUND THIS DATE.

---

 NOTIFY YOUR CURRENT LANDLORD OF YOUR ESTIMATED MOVE DATE

---

 BEGIN TO GO THROUGH YOUR BELONGINGS, AND PLACE THEM INTO ONE OF 5 CATEGORIES. KEEP, STORAGE, SELL, DONATE, TOSS.

---

 MAKE AN INVENTORY OF ALL THE HOUSEHOLD ITEMS YOU WILL BE MOVING WITH. TAKE PHOTOS OF FURNITURE, AND EXPENSIVE ITEMS.

---

 IF YOU OWN YOUR CURRENT HOME, DECIDE WHETHER YOU WILL RENT OR SELL. FIND A REALTOR/PROPERTY MANAGEMENT COMPANY IMMEDIATELY.

---

 GET IN TOUCH WITH THE FINANCE OFFICE TO DISCUSS ANY ENTITLEMENTS THAT ARE AVAILABLE TO YOU AND YOUR SITUATION.

---

 NOTIFY YOUR NEW POST OF YOUR MOVING DATE, AND ASK FOR EVERYTHING THAT THEY REQUIRE. ADD THESE ITEMS TO YOUR BINDER.

---

 IF REQUIRED (OCONUS), ORGANIZE SHIPMENT OF YOUR VEHICLE TO YOUR NEW POSTING.

---

 BEGIN TO LOOK AT SCHOOLS / CHILDCARE FOR ANY CHILDREN,

---

 START SAVING AND BUDGETING FOR MOVE.

---

 BEGIN KEEPING RECEIPTS RELEVANT TO YOUR MOVE

---

 PUT YOUR NAME ON THE HOUSING LIST (IF REQUIRED)

---

 COMPLETE NAVMC 11799 FOR SPONSORSHIP TO THE NEXT INSTALLATION

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# Checklist-

## Two Months Prior

 GATHER ALL MEDICAL RECORDS FOR ALL FAMILY MEMBERS.  
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 CONTINUE TALKS WITH REALTOR / HOUSING OFFICE IN NEW LOCATION.  
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 CHOOSE A SCHOOL / CHILDCARE LOCATION AND BEGIN TO GATHER ALL REQUIRED DOCUMENTS.  
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 IF YOU INTEND ON BUYING PROPERTY IN THE NEW LOCATION, BEGIN TALKS WITH THE BANK AND ORGANIZE YOUR FINANCING OPTIONS.  
-----

 ORGANIZE ANY REQUIREMENTS FOR YOUR PETS, INCLUDING MOVING, VACCINATIONS, CHECKUPS AND GATHERING RECORDS.  
-----

 GIVE YOUR CURRENT LANDLORD / HOUSING OFFICE A SPECIFIC MOVING DATE (AT LEAST 30 DAYS NOTICE SHOULD BE GIVEN).  
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 SCHEDULE VEHICLE MAINTENANCE  
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 CONTINUE TO SELL, TOSS OR DONATE ITEMS  
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 BOOK ACCOMMODATION FOR MOVING DAY AND OTHER REQUIRED DAYS  
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# Checklist-

## One Month Prior

-  VERIFY ALL DATES WITH ALL REQUIRED PARTIES (REALTORS, HOUSING OFFICES, EMPLOYERS, SCHOOLS ETC)

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-  NOTIFY THE POST OFFICE OF YOUR NEW ADDRESS.

---
-  SELL ALL FINAL ITEMS. IF YOU CANNOT SELL, DONATE OR DECIDE TO BRING TO NEW LOCATION.

---
-  ORGANIZE A COPY OF ALL YOUR CHILDS CURRENT SCHOOLING DOCUMENTS. SEND ANY OF THESE RECORDS TO YOUR CHILDS NEW SCHOOL.

---
-  CANCEL ANY LOCAL DELIVERIES (NEWSPAPERS, FOOD SERVICES ETC)

---
-  CONTACT ANY UTILITY COMPANIES, AND LET THEM KNOW YOUR MOVING DATE.

---
-  BEGIN ORGANIZING ALL ITEMS FOR MOVING, INCLUDING LABELING AND PACKING. MILITARY GEAR IS WEIGHED SEPERATLEY.

---
-  FILL OUT ANY ENTITLEMENT FORMS REQUIRED FOR FINANCIAL ASSISTANCE

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-  BEGIN NOTIFYING ALL PARTIES OF NEW ADDRESS ASAP

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-  RETURN ANY BORROWED ITEMS.

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-  ARRANGE FINAL INSPECTION OF CURRENT PROPERTY

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# Checklist-

## Two Weeks Prior

 START PACKING. LABEL AND PACK BOXES BY ROOM. \_\_\_\_\_

 SET ASIDE ITEMS THAT YOU WILL CARRY WITH YOU. SET THESE ASIDE AND ENSURE MOVERS DO NOT TAKE THEM \_\_\_\_\_

 PURCHASE ANY MEDICAL SUPPLIES (PRESCRIPTIONS ETC) TO THAT YOU HAVE AT LEAST A FEW WEEKS WORTH AFTER THE MOVE. \_\_\_\_\_

 USE UP ANY PERISHABLE FOOD, AND BE CONSCIOUS NOT TO OVER PURCHASE ANYTHING THAT YOU WILL NOT USE WITHIN THE NEXT TWO WEEKS. \_\_\_\_\_

 GET BACK ANY ITEMS YOU MAY HAVE LOANED TO OTHERS. \_\_\_\_\_

 CONFIRM MOVING DATES WITH TRANSPORTATION OFFICE AND MOVING COMPANY \_\_\_\_\_

 ORGANIZE BILL TERMINATION AT EXISTING HOUSE \_\_\_\_\_

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# Checklist- One Week Prior

 DISPOSE OF ALL FLAMMABLES (GAS, PAINT, OIL ETC) \_\_\_\_\_

 MAKE SURE ALL PAPERWORK IS FINALIZED AND PRINTED. ADD TO BINDER. \_\_\_\_\_

 FINISH PACKING EVERYTHING YOU WONT NEED WITHIN THE WEEK. SET ASIDE ANY ITEMS YOU WILL BE CARRYING WITH YOU. \_\_\_\_\_

 MAKE ARRANGEMENTS FOR CHILDREN AND PETS ON MOVING DAY. \_\_\_\_\_

 PURCHASE ANY REQUIRED PACKING / MOVING SUPPLIES. \_\_\_\_\_

 FINALIZE INVENTORY OF ALL ITEMS BEING MOVED. \_\_\_\_\_

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# Checklist- Day Before

 PACK PERSONAL ITEMS INTO CAR. \_\_\_\_\_

 REMOVE AND DISPOSE OF ALL TRASH / ITEMS THAT WILL NOT BE MOVING WITH YOU. \_\_\_\_\_

 FINISH PACKING DAY PACK / ITEMS COMING WITH YOU \_\_\_\_\_

 STASH ALL VALUABLES (CASH, JEWELRY, IMPORTANT DOCUMENTS, PCS BINDER) \_\_\_\_\_

 BEGIN CLEANING PROCESS \_\_\_\_\_

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# Checklist- Day Of

 HAVE A SOLID BREAKFAST BEFORE MOVERS ARRIVE. \_\_\_\_\_

 PLACE ANY TRASH OUTSIDE. \_\_\_\_\_

 ENSURE THAT ANY ITEMS YOU ARE TAKING WITH YOU (NON-HHG) ARE KEPT ASIDE AND THE MOVERS ARE NOTIFIED. \_\_\_\_\_

 CLEAN THE HOUSE AFTER MOVERS HAVE LEFT THE HOUSE. USE HOUSE CLEANING CHECKLIST. \_\_\_\_\_

 WATCH PACKING AND UN-PACKING WHERE POSSIBLE \_\_\_\_\_

 HAVE ONE LAST SCAN OF ALL ROOMS, YARDS, GARAGES FOR ITEMS YOU MAY HAVE MISSED \_\_\_\_\_

 GET YOUR GOVERNMENT BILL OF LANDING AND OTHER FORMS FROM YOUR DRIVER. \_\_\_\_\_

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# Checklist- After the Move

CHECK YOUR INVENTORY LIST, AND ENSURE EVERYTHING ARRIVED. IF YOU DISCOVER SOME ITEMS ARE MISSING OR BROKEN, ADD THESE TO YOUR DD FORM 1840 AND SUBMIT A CLAIM ASAP.

ITEMS THAT WERE DISASSEMBLED BY YOUR CARRIER SHOULD BE REASSEMBLED BY THEM ON DELIVER. YOU MAY ALSO REQUEST YOUR ITEMS BE UNPACKED.

CHECK IN TO YOUR DUTY STATION

CLEAN NEW PROPERTY BEFORE UNPACKING IF POSSIBLE

STORE ALL PCS DOCUMENTS IN A SAFE SPACE. KEEP ALL DOCUMENTS, INCLUDING RECEIPTS FOR REIMBURSEMENT

REGISTER VEHICLE WITH NEW STATE (IF REQUIRED)

ARRANGE FOR WIFI / OTHER UTILITIES

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# Checklist



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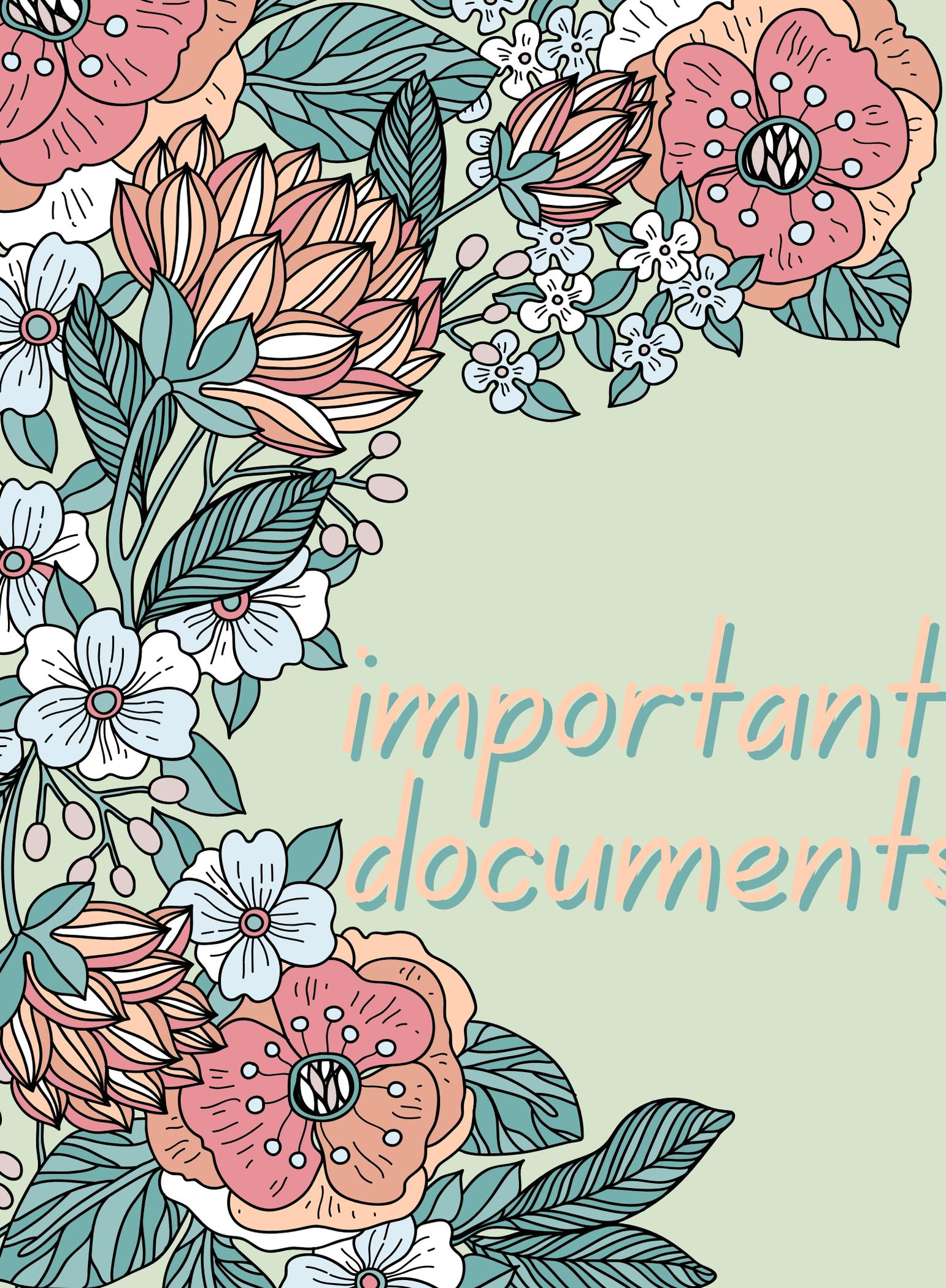


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*important  
documents*

# DOCUMENT LIST

DOCUMENT	SECTION/CATEGORY	NOTES
<input type="checkbox"/> DRIVER'S LICENSE		
<input type="checkbox"/> SOCIAL SECURITY CARDS		
<input type="checkbox"/> PASSPORTS		
<input type="checkbox"/> BIRTH CERTIFICATES		
<input type="checkbox"/> MARRIAGE CERTIFICATE		
<input type="checkbox"/> MILITARY ORDERS		
<input type="checkbox"/> MILITARY CONTRACTS		
<input type="checkbox"/> SPONSOR INFO		
<input type="checkbox"/> OVERSEAS CLEARANCE		
<input type="checkbox"/> DEPENDENT ENTRY APP		
<input type="checkbox"/> OLD HOUSE INSPECTION		
<input type="checkbox"/> NEW HOUSING DOCS		
<input type="checkbox"/> OWNERSHIP DEEDS		
<input type="checkbox"/> BANKING INFO		
<input type="checkbox"/> TAX RECORDS		

# DOCUMENT LIST

DOCUMENT	SECTION/CATEGORY	NOTES
<input type="checkbox"/> MEDICAL RECORDS		
<input type="checkbox"/> DENTAL RECORDS		
<input type="checkbox"/> IMMUNIZATIONS		
<input type="checkbox"/> PRESCRIPTIONS		
<input type="checkbox"/> INSURANCE DOCS		
<input type="checkbox"/> STOCK CERTIFICATES		
<input type="checkbox"/> PERSONAL CHECKS		
<input type="checkbox"/> DEBIT/CREDIT CARDS		
<input type="checkbox"/> SAVINGS BONDS		
<input type="checkbox"/> HHG PHOTO EVIDENCE		
<input type="checkbox"/> HHG SHIPPING INFO		
<input type="checkbox"/> HHG HIGH VALUE LIST		
<input type="checkbox"/> HHG INVENTORY		
<input type="checkbox"/> POV INSPECTION SHEET		
<input type="checkbox"/> POV SHIPPING INFO		

# DOCUMENT LIST

DOCUMENT	SECTION/CATEGORY	NOTES
<input type="checkbox"/> HOTEL INFO		
<input type="checkbox"/> HOTEL ITINERARY		
<input type="checkbox"/> FLIGHT ITINERARY		
<input type="checkbox"/> CAR RENTAL FORMS		
<input type="checkbox"/> LEAVE FORMS		
<input type="checkbox"/> SCHOOL RECORDS		
<input type="checkbox"/> SCHOOL INFO		
<input type="checkbox"/> CAR TITLE/LEASE		
<input type="checkbox"/> INSPECTION RECORDS		
<input type="checkbox"/> CAR REGISTRATION		
<input type="checkbox"/> CAR INSURANCE		
<input type="checkbox"/> PET VACCINATION DOCS		
<input type="checkbox"/> MICROCHIP INFO		
<input type="checkbox"/> TRANSPORT CLEARANCE		
<input type="checkbox"/> STORAGE INFO		

# DOCUMENT LIST

DOCUMENT	SECTION/CATEGORY	NOTES
<input type="checkbox"/>		



# detailed contact list

Name  \_\_\_\_\_

Business  \_\_\_\_\_

Website  \_\_\_\_\_

Email  \_\_\_\_\_

Phone  \_\_\_\_\_

Address  \_\_\_\_\_

Notes  \_\_\_\_\_

Name  \_\_\_\_\_

Business  \_\_\_\_\_

Website  \_\_\_\_\_

Email  \_\_\_\_\_

Phone  \_\_\_\_\_

Address  \_\_\_\_\_

Notes  \_\_\_\_\_

Name  \_\_\_\_\_

Business  \_\_\_\_\_

Website  \_\_\_\_\_

Email  \_\_\_\_\_

Phone  \_\_\_\_\_

Address  \_\_\_\_\_

Notes  \_\_\_\_\_

Name  \_\_\_\_\_

Business  \_\_\_\_\_

Website  \_\_\_\_\_

Email  \_\_\_\_\_

Phone  \_\_\_\_\_

Address  \_\_\_\_\_

Notes  \_\_\_\_\_

Name  \_\_\_\_\_

Business  \_\_\_\_\_

Website  \_\_\_\_\_

Email  \_\_\_\_\_

Phone  \_\_\_\_\_

Address  \_\_\_\_\_

Notes  \_\_\_\_\_

Name  \_\_\_\_\_

Business  \_\_\_\_\_

Website  \_\_\_\_\_

Email  \_\_\_\_\_

Phone  \_\_\_\_\_

Address  \_\_\_\_\_

Notes  \_\_\_\_\_



*military  
documents*

# Documents



ORDERS



CONTRACTS





housing

# Documents

 TITLES

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 REALTOR/HOUSE RENTING INFO

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 HOME/RENTAL INSURANCE INFO

---

 REPAYMENT INFO

---

 LEASING CONTRACTS

---

 OLD RESIDENCE INFO

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 HOUSE HUNTING

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 CHANGE OF ADDRESS FORM

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 UTILITY SWITCHING SHEET

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# CHANGE OF ADDRESS

	TYPE	COMPANY	DATE
	EMPLOYER		
	POST OFFICE		
	BANK		
	FINANCIAL AID		
	INVESTMENT ACCOUNTS		
	CAR INSURANCE		
	HOME INSURANCE		
	LIFE INSURANCE		9
	GAS		
	WATER		
	POWER		
	INTERNET/CABLE		
	GARBAGE COLLECTION		
	CELL PHONE CARRIER		
	DOCTORS		
	VET		
	SUBSCRIPTIONS		
	DMV/VOTER REGISTRATION		
	AMAZON, ETC.		



# previous addresses

Housing Type

Station

Address

City, State, Zip

Dates

Housing Type

Station

Address

City, State, Zip

Dates

Housing Type

Station

Address

City, State, Zip

Dates

# previous addresses

Housing Type

Station

Address

City, State, Zip

Dates

Housing Type

Station

Address

City, State, Zip

Dates

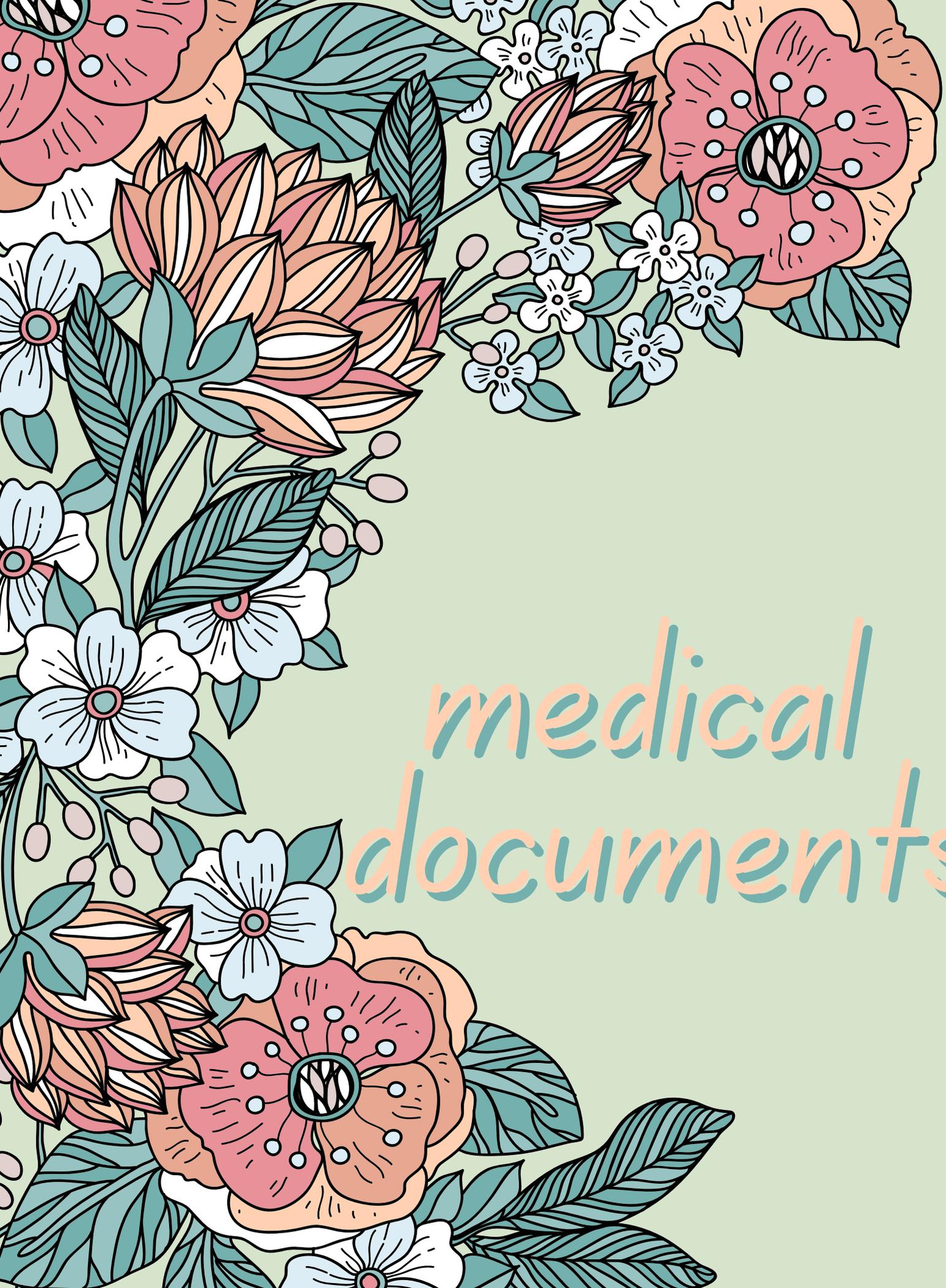
Housing Type

Station

Address

City, State, Zip

Dates



*medical  
documents*

# Documents

 HEALTH RECORDS

---

 PARTNER HEALTH RECORDS

---

 CHILDREN'S HEALTH RECORDS

---

 DENTAL RECORDS

---

 PARTNER DENTAL RECORDS

---

 CHILDREN'S DENTAL RECORDS

---

 BLOOD TYPE INFORMATION

---

 LIST OF ALLERGIES

---

 PRESCRIPTIONS

---

 CURRENT DOCTOR INFORMATION

---

 OVERSEAS SCREENING (IF APPLICABLE)

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*financial  
documents*

# Documents

 CURRENT BANK INFO

---

 TAX RECORDS

---

 FINANCIAL YEAR RECEIPTS

---

 ASSET LIST

---

 EXPENSE TRACKER

---

 BUDGET

---

 DEBT RECORDS

---

 MORTGAGE/LEASING INFO

---

 TRAVEL RECEIPTS

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# Entitlements & Allowances

-  TRAVEL ALLOWANCE
-  DISLOCATION ALLOWANCE (DLA)
-  PCS MALT RATE/ MILEAGE RATE
-  TEMPORARY LODGING EXPENSE (TLE)- CONUS ONLY
-  TEMPORARY LODGING ALLOWANCE (TLA)- OCONUS ONLY
-  FAMILY MULTIPLIER FOR TLE AND TLA
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# Budget Planner

Month: \_\_\_\_\_

## INCOME STREAMS

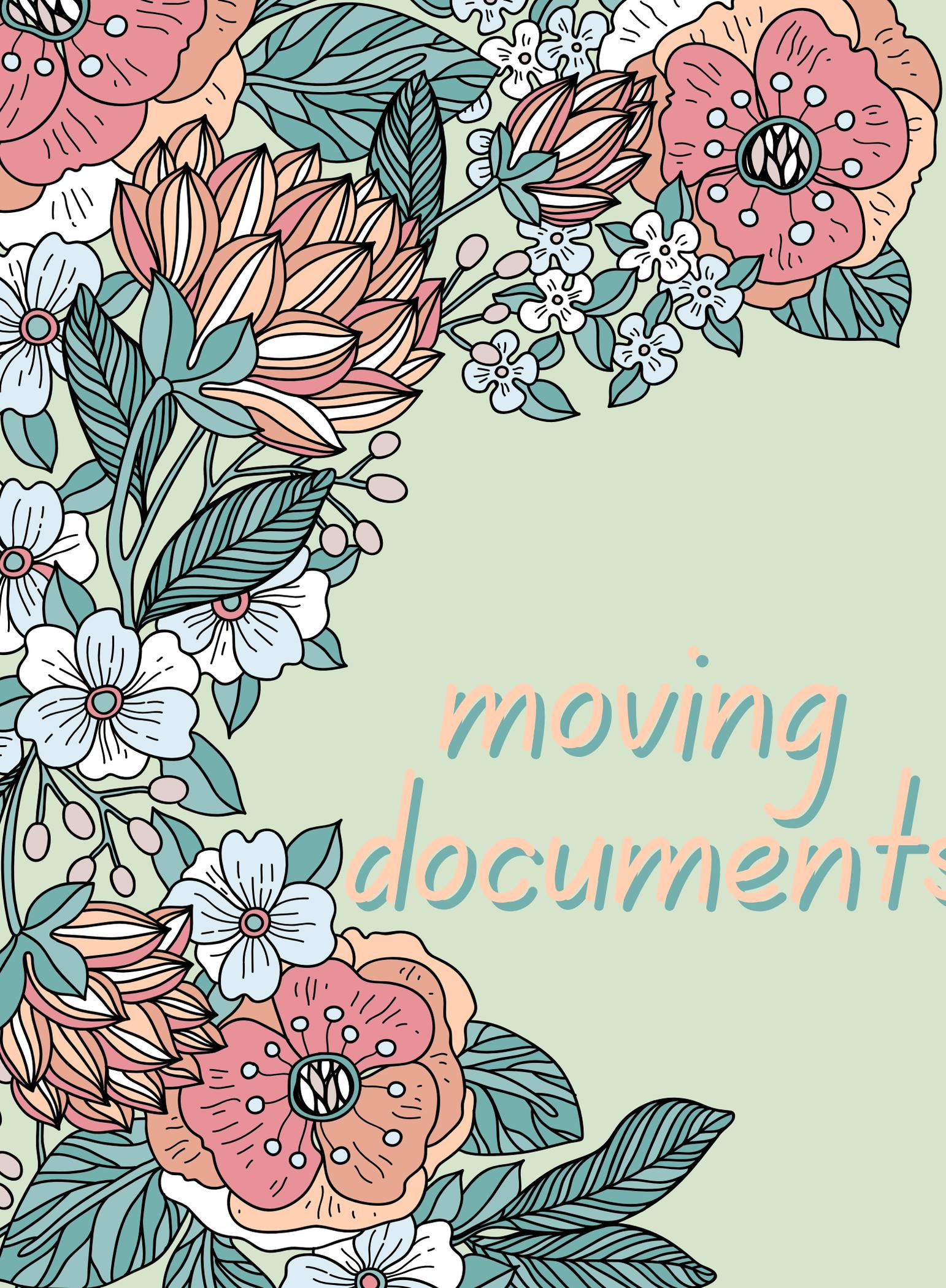
	SOURCE	BUDGET	ACTUAL
Income 1			
Income 2			
Other			
Other			

## FIXED AND VARIABLE EXPENSES

EXPENSES	BUDGET	ACTUAL	DIFFERENCE

## SAVINGS

TOTAL SAVINGS	
Total Income (After Tax)	
Total Fixed Expenses	
Total Variable Expenses	
Savings - Income + Expenses	



*moving  
documents*



# Documents

 KEEP, SELL, TOSS LIST

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 MOVING COMPANY CONFIRMATION

---

 MOVING COMPANY RECEIPTS

---

 INVENTORY RECORDS

---

 PACKING LISTS

---

 MOVING SCHEDULE

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# Cleaning Checklist

## BEDROOMS

DUST

SWEEP/MOP/VACUUM

CLOSET

WINDOWS/DOORS

LIGHTS/FANS/OUTLETS

## LIVING SPACES

DUST

SWEEP/MOP/VACUUM

CLOSET

WINDOWS/DOORS

LIGHTS/FANS/OUTLETS

## BATHROOMS

TOILET

SINK/MIRROR

SHOWER/BATHTUB

COUNTER

FLOOR/WALLS

## KITCHEN

FRIDGE/FREEZER

STOVE/OVEN

CABINETS/WALLS/DRAWERS

SWEEP/MOP FLOOR

DOORS/WINDOWS/WALLS

## GARAGE/YARD/MISC.





# MOVING DAY

\_\_\_\_\_ Date

0500 \_\_\_\_\_

0600 \_\_\_\_\_

0700 \_\_\_\_\_

0800 \_\_\_\_\_

0900 \_\_\_\_\_

1000 \_\_\_\_\_

1100 \_\_\_\_\_

1200 \_\_\_\_\_

1300 \_\_\_\_\_

1400 \_\_\_\_\_

1500 \_\_\_\_\_

1600 \_\_\_\_\_

1700 \_\_\_\_\_

1800 \_\_\_\_\_

1900 \_\_\_\_\_

2000 \_\_\_\_\_

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# MOVING

MONTH : \_\_\_\_\_

# WEEK PREP

WEEK : \_\_\_\_\_

## 6 DAYS PRIOR

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 5 DAYS PRIOR

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 4 DAYS PRIOR

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 3 DAYS PRIOR

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## TWO DAYS PRIOR

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## DAY BEFORE

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## DAY OF

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## DAY AFTER

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



*travel*  
*documents*

# Documents

 FLIGHT INFORMATION

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 PET FLIGHT/ CARGO INFORMATION

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 LUGGAGE RECEIPTS

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 INITIAL ACCOMMODATION INFORMATION

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# Bucket List:

## Hawaii



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# Bucket List:

## New Duty Station

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*children's  
documents*

# Documents

 SCHOOL RECORDS

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 PREVIOUS SCHOOL CONTACTS

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 NEW SCHOOL/ CHILDCARE INFORMATION

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 SPORT/ CLUB HISTORY

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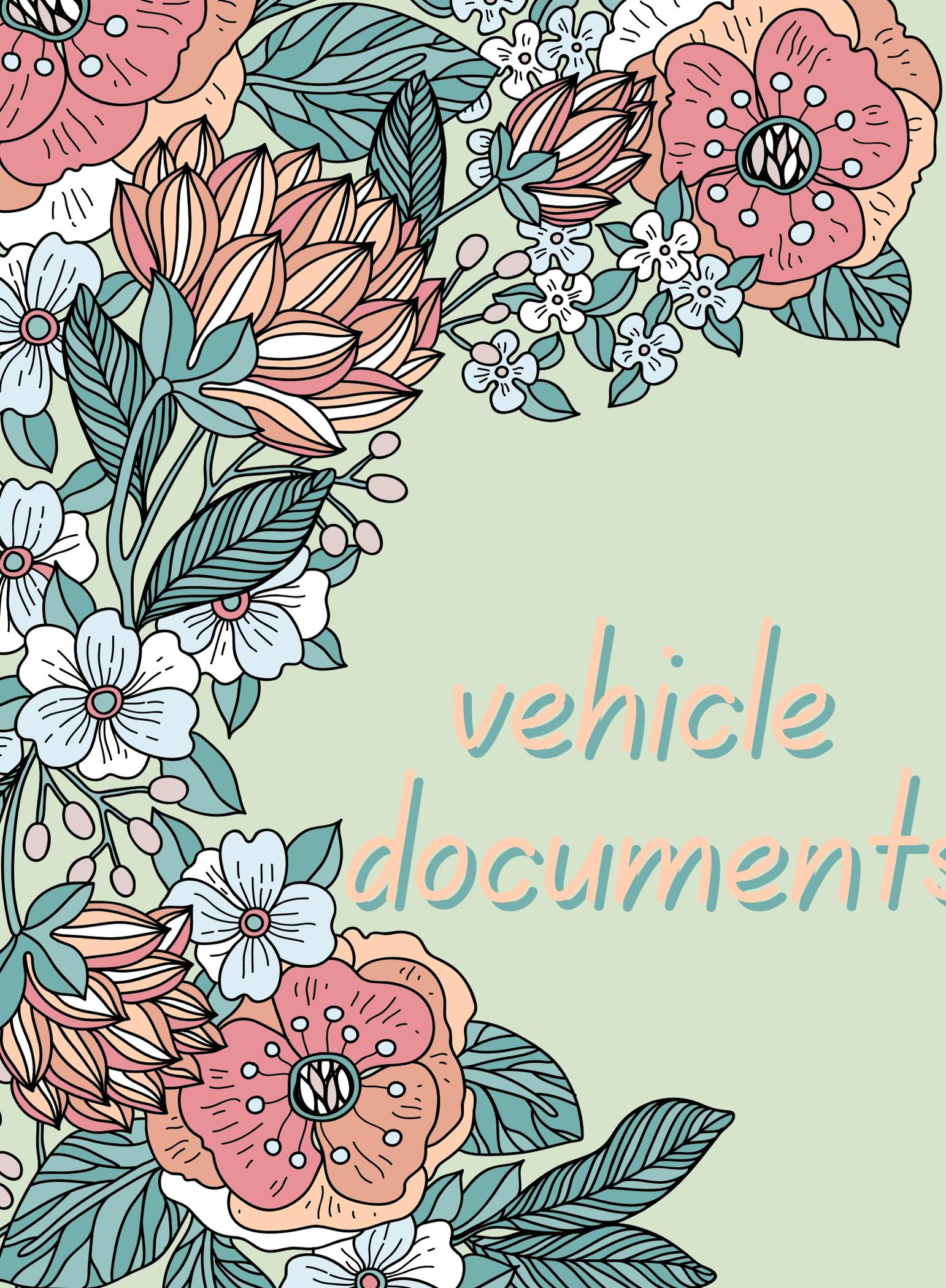
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*vehicle  
documents*

# Documents

 LEASE INFORMATION

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 INSURANCE INFORMATION

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 LEASE/ TITLE/ WARRANTY

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 AUTO REPAIR HISTORY

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 SHIPPING INFORMATION

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*pet  
documents*

# Documents

 MICROCHIP NUMBER

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 SPADE/NEUTER INFORMATION

---

 IMMUNIZATION RECORDS

---

 PREVIOUS VET CONTACT INFORMATION

---

 HEALTH CERTIFICATES

---

 TRANSPORT CLEARANCE

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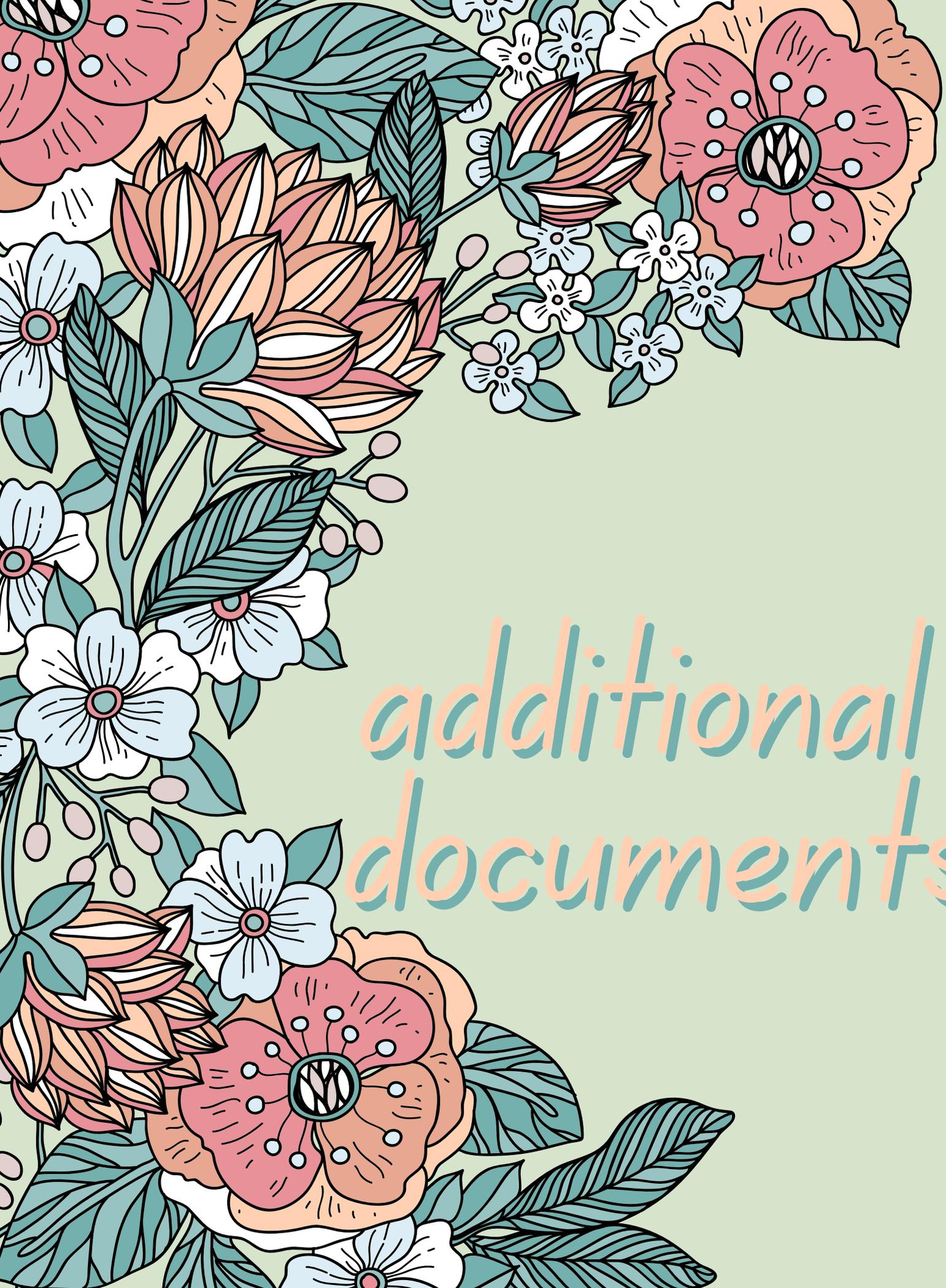
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*additional  
documents*

# Documents



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