Major Components Of A Healthy Financial Plan

	Action Needed	Action Date
Written Cash Flow Plan		
Will and/or Estate Plan		
Debt Reduction Plan		
Tax Reduction Plan		
Emergency Funding		
Retirement Funding		
College Funding		
Charitable Giving		
Teach My Children		
Life Insurance		
Health Insurance		
Disability Insurance		
Auto Insurance		
Homeowners Insurance		
I, , a r	esponsible adult, do	hereby swear to
take the above stated acti	ons by the above	stated dates to
financially secure the well-l	being of my family a	and myself.
(Copy to Spouse)		
Signed:	Date:	