



FINANCIAL ACTION PLAN

	Action Needed	Goal Date	Date Accomplished
Written Cash Flow Plan	_____	_____	_____
Debt Reduction Plan	_____	_____	_____
Tax Reduction Plan	_____	_____	_____
Emergency Savings Funding	_____	_____	_____
Long-Term Savings Funding	_____	_____	_____
Charitable Giving/Tithing	_____	_____	_____
Dream/Vision Board	_____	_____	_____
Personal Development	_____	_____	_____
Start My Business	_____	_____	_____
Teach My Children	_____	_____	_____
Survival Preparation Planning	_____	_____	_____
Life Insurance	_____	_____	_____
Health Insurance	_____	_____	_____
Disability Insurance	_____	_____	_____
Auto Insurance	_____	_____	_____
Homeowner's Insurance	_____	_____	_____
Will and/or Estate Planning	_____	_____	_____

I (We) _____, (a) responsible adult(s), do hereby promise to take full responsibility for my (our) financial future and to take the above declared actions by the stated dates to secure the well-being of my (our) family and myself (ourselves).

Signed: _____ Date: _____

Signed: _____ Date: _____