Your Get Well Plan

Make a list here of what you want in your life. Include tangible and non-tangible things. Include the goals, dreams, experiences and assets you want in your life.

LIST OF ITEMS	**EST. VALUE**
Financial List:	
_____	**$**_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Sub-Total	**$**_____
Emotional/Mental List:	
_____	$_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Sub-Total	$_____
Physical List:	
_____	$_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Sub-Total	$_____
Experiences List:	

_____ $_____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
Sub-Total $_____

Spiritual List:

_____ $_____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
Sub-Total $_____

Giving List:

_____ $_____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
Sub-Total $_____

Other:

_____ $_____
_____ _____
Sub-Total $_____

TOTAL: $_____