My Planner

2 0 2 3

Monthly Planner

MONTH : _____

MON	TUE	WED	THU	FRI	SAT	SUN

PRIORITIES

NOTES

Monthly Budget

MONTH: _____

TOTAL INCOME:

OTHER INCOME / SAVINGS:

EXPENSES ITEM	BUDGET	ACTUAL	DIFFERENCE	NOTES
MORTGAGE/RENT				
HOUSEHOLD MAINTENANCE				
TAXES				
INSURANCE				
ELECTRICITY				
WATER				
SEWAGE				
GAS				
PHONE				
TRASH				
CABLE				
CELL PHONE				
GROCERIES				
ENTERTAINMENT				
CHARITY/DONATIONS				
FUEL				
AUTO INSURANCE				
CAR PAYMENT				
CHILD CARE				
CREDIT CARDS/DEBT				
LOANS				
DINING OUT				
SPORTING EVENTS				
LIVE THEATER				
CONCERTS				
MOVIES				
TOTAL EXPENSES:				

My Weekly Planner

Month : _____ Week : _____

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

Weekly Reflection

My Daily Planner

S M T W T F S

Date:

Schedule

06:00	
07:00	
08:00	
09:00	
10:00	
11:00	
12:00	
13:00	
14:00	
15:00	
16:00	
17:00	
18:00	
19:00	
20:00	

To Do List

- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]

Notes:

Gratitude Journal

Date: _____

S M T W T F S

Today I'm grateful for:

- _____
- _____
- _____

WATER INTAKE

1L 2L 3L

WEATHER

TODAYS AFFIRMATION

- _____
- _____
- _____
- _____

Notes / Reminders

_____
_____
_____
_____
_____
_____
_____
_____

Something I'm proud of

- _____
- _____
- _____
- _____

Tomorrow I look forward to

- _____
- _____
- _____
- _____

Habit Tracker

NAME: _____ WEEK: _____

TASKS	S	M	T	W	T	F	S
WAKE UP BY 6AM							
HEALTHY BREAKFAST							
NO SUGAR							
DRINK WATER							
NO ALCOHOL							
LISTEN MUSIC							
READ FOR 15MIN A DAY							
WORKOUT FOR 30 MIN A DAY							
5000 - 8000 STEPS							
CLEAN A ROOM OR SPACE							
LEARN SOMETHING NEW							
COMPLETE TO DO LIST							
CHECK EMAILS							
PLAN OUT A GOAL							
NO EATING AFTER 9PM							
GO TO BED BEFORE 11PM							

Self - care Planner

DATE: _____ S M T W T F S

THINGS THAT MADE ME HAPPY TODAY

- _____
- _____
- _____

WATER INTAKE

1L 2L 3L

TODAYS MOOD

SELF-CARE ACTIVITIES

- _____
- _____
- _____
- _____
- _____

DAILY NUTRITION

Breakfast _____

Lunch _____

Dinner _____

Snack _____

HABITS TO START

- _____
- _____
- _____
- _____

HABITS TO STOP

- _____
- _____
- _____
- _____

To-Do List

TOP PRIORITIES:

1
2
3
4
5
6
7

APPOINTMENTS:

1
2
3
4
5
6
7

TODAYS TO-DO:

- [ ]
- [ ]
- [ ]
- [ ]
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TOMORROW TO-DO:

- [ ]
- [ ]
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NOTES:

DOODLE:

Monthly Review

MONTH : _____

Top accomplishment

1 _____

2 _____

3 _____

4 _____

5 _____

How can I make next month even better

_____

_____

_____

Overall this month

_____

_____

_____

_____

Notes

MY NOTES

MY NOTES

MY NOTES

MY NOTES

MY NOTES

MY NOTES