



MEASURE & TWEAK

MUST DO	If NO, what was the Friction Point?
Did I complete the outcome? Y <input type="checkbox"/> N <input type="checkbox"/> →	REMEDY:
HOUR OF POWER	If NO, what was the Friction Point?
Did I complete the outcome? Y <input type="checkbox"/> N <input type="checkbox"/> →	REMEDY:
8 HOURS OF REM SLEEP	If NO, what was the Friction Point?
Did I complete the outcome? Y <input type="checkbox"/> N <input type="checkbox"/> →	REMEDY:
FOLLOW CHECKLIST	If NO, what was the Friction Point?
Did I complete the outcome? Y <input type="checkbox"/> N <input type="checkbox"/> →	REMEDY:
REACH OUT TO PEOPLE	If NO, what was the Friction Point?
Did I complete the outcome? Y <input type="checkbox"/> N <input type="checkbox"/> →	REMEDY:
OUTSTANDING STATE	If NO, what was the Friction Point?
Did I complete the outcome? Y <input type="checkbox"/> N <input type="checkbox"/> →	REMEDY:
HEALTH ACTIVITY	If NO, what was the Friction Point?
Did I complete the outcome? Y <input type="checkbox"/> N <input type="checkbox"/> →	REMEDY:
CASH PRODUCING	If NO, what was the Friction Point?
Did I complete the outcome? Y <input type="checkbox"/> N <input type="checkbox"/> →	REMEDY:

OVERALL FRICTION POINTS:

PATTERNS:

ACTION STEPS TO IMPROVE:

SYSTEMS NEEDED TO IMPROVE:

SCHEDULE:

FLOW %	TODAY
AM I MAKING PROGRESS?	
	0 ————— ————— 10