



GUARDIAN BUILDER

PRINTABLES



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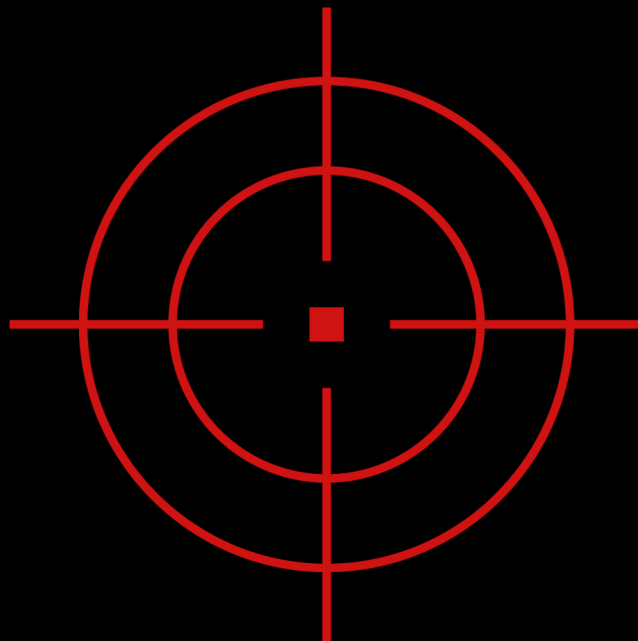
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HOW TO USE THE PRINTABLES:

- FIND WHAT YOU NEED
- PRINT
- USE
- WIN



PERSONAL



W E E K L Y P L A N N E R

M O N D A Y	T U E S D A Y
W E D N E S D A Y	T H U R S D A Y
F R I D A Y	S A T U R D A Y
S U N D A Y	N O T E S

MONTHLY PLANNER

MONTH :

YEAR :

MON	TUE	WED	THU	FRI	SAT	SUN

TO DO LIST

NOTES

YEARLY EVENTS

JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER

2023 CALENDAR

January

M	T	W	T	F	S	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	14
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

February

M	T	W	T	F	S	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

MARCH

M	T	W	T	F	S	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

APRIL

M	T	W	T	F	S	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

May

M	T	W	T	F	S	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

June

M	T	W	T	F	S	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

JULY

M	T	W	T	F	S	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

AUGUST

M	T	W	T	F	S	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

SEPTEMBER

M	T	W	T	F	S	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

OCTOBER

M	T	W	T	F	S	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	14
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

NOVEMBER

M	T	W	T	F	S	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

DECEMBER

M	T	W	T	F	S	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

LIFE

GOALS

FOR EACH OF THE CATEGORIES BELOW, WRITE DOWN THINGS YOU ARE DOING WELL AND WHERE YOU NEED IMPROVEMENT. TAKE THE TIME TO REFLECT ON THESE, AND WRITE A GOAL FOR EACH CATEGORY.

CATEGORY	WHAT I'M DOING WELL	WHERE I NEED IMPROVEMENT	MY GOALS
FAMILY			
FRIENDS			
WORK/ SCHOOL			
BODY			
MENTAL HEALTH			
SPIRITUALITY			

THE GOALS LIST

N
O
W

- _____
- _____
- _____
- _____
- _____
- _____

N
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- _____
- _____
- _____
- _____
- _____
- _____

L
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T
E
R

- _____
- _____
- _____
- _____
- _____
- _____

GIVE YOUR GOALS DEADLINES

BRAIN DUMP

TO DO
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

TO RESEARCH
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

TO CALL
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

TO EMAIL

MEALS

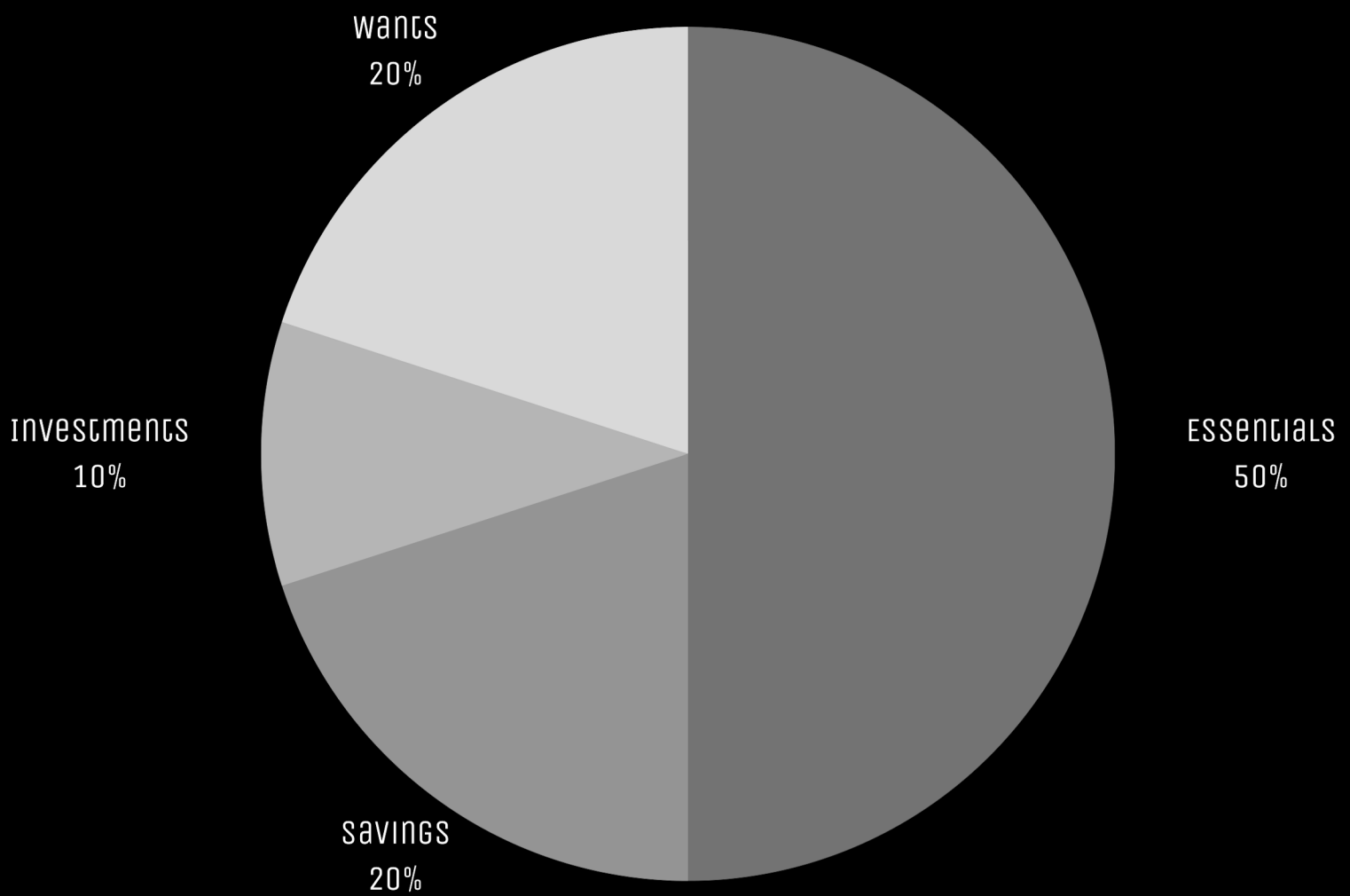
RANDOM THOUGHTS

FINANCE



RELENTLESS
R | G
GUARDIAN

50/20/20/10



BUDGET TACTIC

DEBT TRACKER

DEBT NAME: _____ CREDITOR: _____

START BALANCE: _____	MINIMUM PAYMENT: _____
INTEREST RATE: _____	GOAL MONTHLY REPAYMENT: _____
DUE DATE: _____	GOAL PAYOFF DATE: _____

DATE:	AMOUNT	BALANCE	NOTES

WISH LIST

1	<input type="checkbox"/>
2	<input type="checkbox"/>
3	<input type="checkbox"/>
4	<input type="checkbox"/>
5	<input type="checkbox"/>
6	<input type="checkbox"/>
7	<input type="checkbox"/>
8	<input type="checkbox"/>
9	<input type="checkbox"/>
10	<input type="checkbox"/>
11	<input type="checkbox"/>
12	<input type="checkbox"/>
13	<input type="checkbox"/>
14	<input type="checkbox"/>
15	<input type="checkbox"/>
16	<input type="checkbox"/>
17	<input type="checkbox"/>
18	<input type="checkbox"/>
19	<input type="checkbox"/>
20	<input type="checkbox"/>

SAVING TRACKER

SAVING FOR -

AMOUNT -

DUE BY -

TOTAL

DEPOSITS

DECEMBER

\$

NOVEMBER

\$

OCTOBER

\$

SEPTEMBER

\$

AUGUST

\$

JULY

\$

JUNE

\$

MAY

\$

APRIL

\$

MARCH

\$

FEBRUARY

\$

JANUARY

\$

NUTRITION

RELENTLESS
R | G
GUARDIAN



VITAMIN/SUPPLEMENT

Date:	STEP - 1	STEP - 2	STEP - 3	STEP - 4	STEP - 5
-------	----------	----------	----------	----------	----------

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

VITAMINS	ITEM	DOSAGE	TIME	M	T	W	T	F	S	S

SUPPLEMENT	ITEM	DOSAGE	TIME	M	T	W	T	F	S	S

OTHERS	ITEM	DOSAGE	TIME	M	T	W	T	F	S	S

NOTES
<ul style="list-style-type: none"> • •



HEALTH

&

FITNESS



WORKOUT LOG

DATE				
WEIGHT				
SLEEP				
CALORIES				
WATER				

CORE EXERCISES	WEIGHT	REPS	WEIGHT	REPS	WEIGHT	REPS

UPPER BODY EXERCISES	WEIGHT	REPS	WEIGHT	REPS	WEIGHT	REPS

LOWER BODY EXERCISES	WEIGHT	REPS	WEIGHT	REPS	WEIGHT	REPS

CARDIO	TIME	DISTANCE	INTENSITY

WEEKLY WORKOUT

	FOCUS	FULL BODY	UPPER BODY	CORE	LOWER BODY	ACTIVE REST
MON						
TUES						
WED						
THURS						
FRI						
SAT						
SUN						

MEASUREMENT TRACKER

BEFORE

AFTER

WEIGHT _____
DATE _____

WEIGHT _____
DATE _____

RIGHT ARM _____

RIGHT ARM

LEFT ARM _____

LEFT ARM

CHEST _____

CHEST

WAIST _____

WAIST

HIPS _____

HIPS

RIGHT THIGH _____

RIGHT THIGH

LEFT THIGH _____

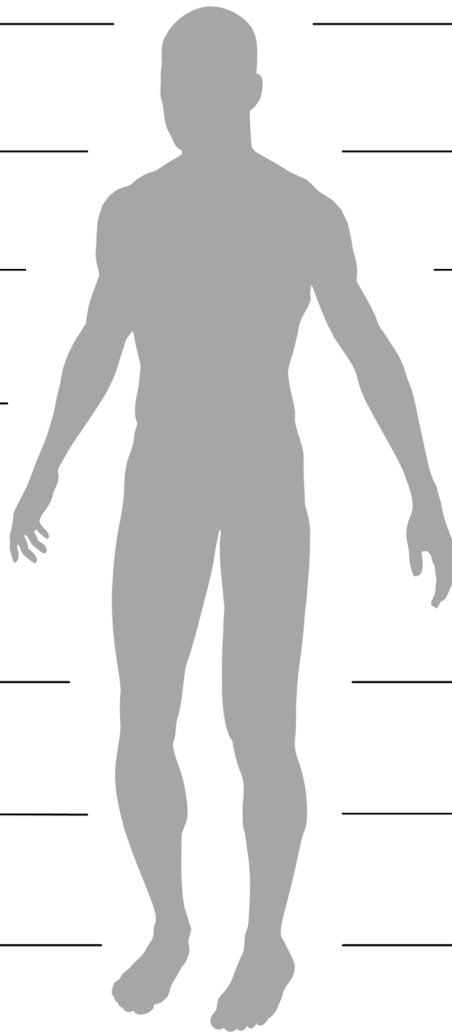
LEFT THIGH

RIGHT CALF _____

RIGHT CALF

LEFT CALF _____

LEFT CALF



NOTES

•

•

FITNESS GOALS

START:

STARTING WEIGHT

FINAL WEIGHT

FINISH:

DURATION:

START

END

NECK	
BUST	

NECK	
BUST	

BICEPS	
WAIST	

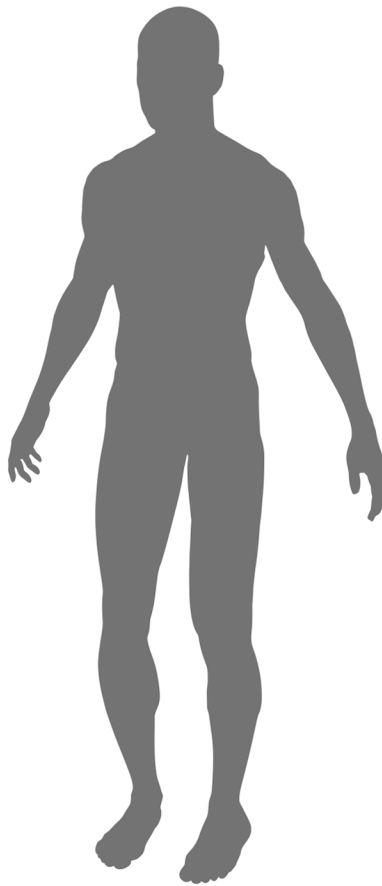
BICEPS	
WAIST	

HIPS	
THIGHS	

HIPS	
THIGHS	

ABS	
CALVES	

ABS	
CALVES	



NEW HEALTHY HABITS

<ul style="list-style-type: none">••

BAD HABITS TO CUT

<ul style="list-style-type: none">••

MOTIVATION & INSPIARATION

--

OTHER



PASSWORD TRACKER

WEBSITE:
USERNAME:
PASSWORD:
NOTES:

WEBSITE:
USERNAME:
PASSWORD:
NOTES:

WEBSITE:
USERNAME:
PASSWORD:
NOTES:

WEBSITE:
USERNAME:
PASSWORD:
NOTES:

WEBSITE:
USERNAME:
PASSWORD:
NOTES:

WEBSITE:
USERNAME:
PASSWORD:
NOTES:

WEBSITE:
USERNAME:
PASSWORD:
NOTES:

WEBSITE:
USERNAME:
PASSWORD:
NOTES:

PROJECT PLANNER

CATAGORY :

START DATE :

/ /

PROJECT NAME :

DUE DATE :

/ /

OBJECTIVES :

MILESTONES :

1
2
3
4

RESOURCES

TIME LINE

NOTES

ACTION PLAN

DEADLINE

COMPLETE

PROJECT TRACKER

START DATE :

PROJECT NAME :

DUE DATE :

TIMELINE

--	--	--	--	--

OBJECTIVE

METTING

	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

NOTES

DETIALS

TO DO

<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

NOTES

TRIP ITINERARY

NAME:

DURATION TO STAY:

DESTINATION:

FLIGHT NO:

HOTEL DETAILS:

DAYS

WHAT TO DO

BUDGET

1

2

3

4

NOTES

PACKING LIST

CLOTHING

- _____
- _____
- _____
- _____
- _____
- _____
- _____

ELECTRONIC & GADGETS

- _____
- _____
- _____
- _____
- _____
- _____
- _____

TOILETRIES

- _____
- _____
- _____
- _____
- _____
- _____
- _____

ACCESSORIES

- _____
- _____
- _____
- _____
- _____
- _____
- _____

HEALTH

- _____
- _____
- _____
- _____

ESSENTIALS

- _____
- _____
- _____
- _____

BIRTHDAYS

J U L Y

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

A U G U S T

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

S E P T E M B E R

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

O C T O B E R

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

N O V E M B E R

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

D E C E M B E R

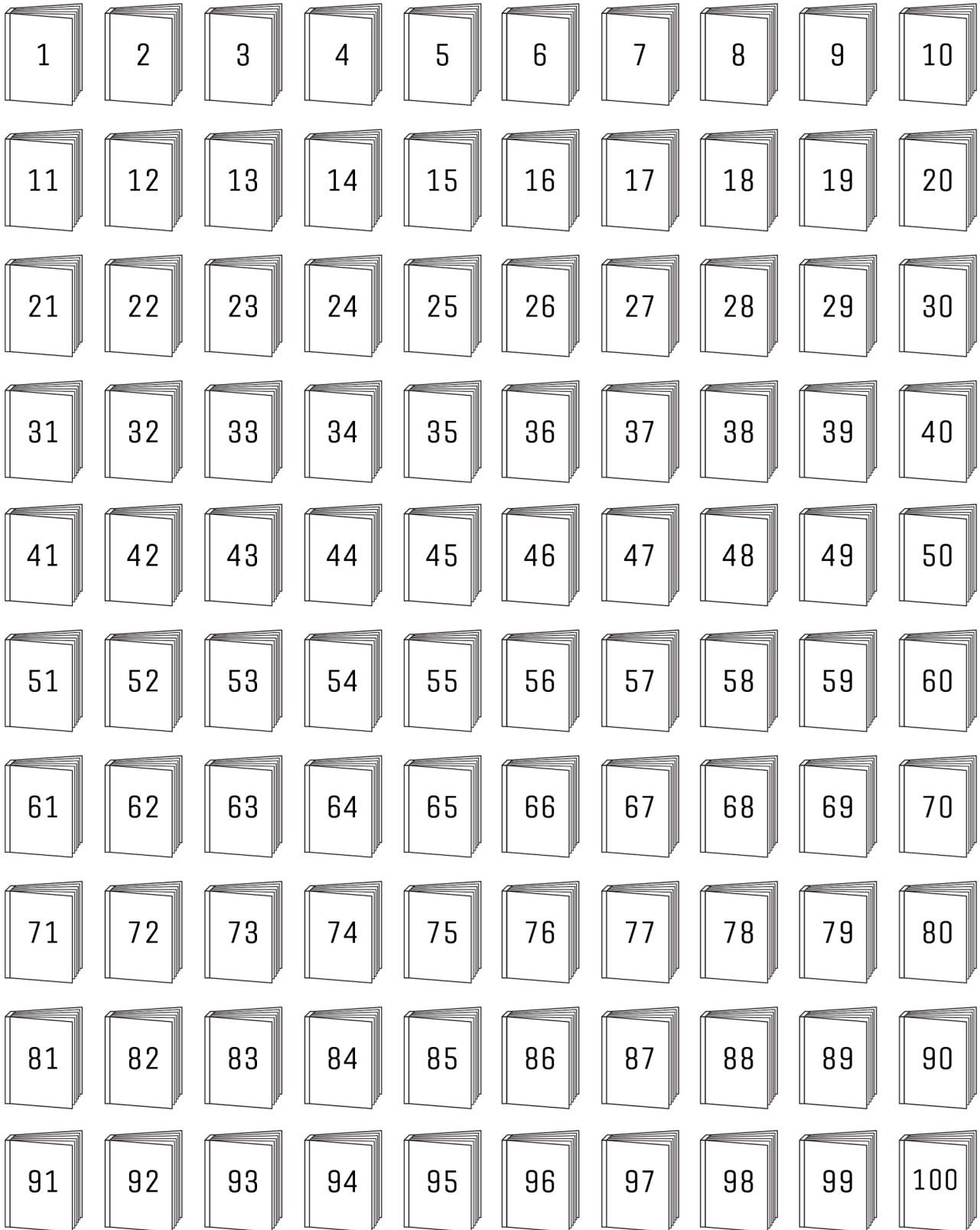
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

100 BOOK CHALLENGE

START:

END:

TOTAL:



THANK
YOU!

