## **INTEGRITY CHECK LIST**

The value of this list is the opportunity to tell the truth. A lie, including living a lie, hides the truth and keeps one producing more of the same less-than-desirable results. Telling the truth creates space. This is not a list of things to do nor does it imply that you are promising to complete anything on the list. It's a snapshot of your life and the level of integrity with which you are operating. It reflects and ultimately supports your commitment to being whole and complete.

## It's unethical to allow things in your space that are upsetting

## **FINANCES** Checkbook(s) balanced Federal tax State tax General excise taxes (if any) Social security tax Unemployment tax Personal loans handled to other's satisfaction Bank, credit card & school loans Monthly bills (including rent) handled to other's satisfaction Family indebtedness handled Child care/alimony handled Library dues VEHICLE Insurance - current, accurate & appropriate Safety inspection & registration Repaired & conscious - representative of how you wish others to relate with you? Drivers license abstract clean (tickets handled) Savings/escrow for replacement HOUSE Kitchen cupboards and drawers conscious Bedroom drawers and closet conscious Living room conscious Bathroom working correctly & conscious Outside repairs conscious Garage/carport organized/conscious Filing system organized and conscious Kitchen - sanitary, neat and organized Insurance - current, accurate & appropriate. If I walked through your house, about what would you be embarrassed? **MISC** Return dates set on loaned & borrowed items Emergency supplies - food-water - first-aid-kit (30— 60— 90— ? — days) Health care (medical - dental - drugs) being handled responsibly Withholds delivered or scheduled to be delivered Correspondence being handled - acknowledgments delivered Broken agreements acknowledged/recreated Name/address/records errors (ss, employment, school, birth, mail) Lies & secrets acknowledged/dissolved/communicated Upsets resolved (take out the source or resolve it so it isn't upsetting.

Living will/trust notarized.

## **INTEGRITY CHECK LIST HEALTH**

What are you addicted to that you believe isn't healthy for you?	
What have you healed?	
When was the last time yo	ı did a liquids only fast? Month Year For how long?
Are you at the weight that	supports your aliveness? Yes No
How many minutes per we	ek do you exercise? (Average for the last six months)
What is your blood pressur	e? Systolic Diastolic Don't know
What is your cholesterol le	vel? HDL LDL Don't know
When was the last time yo	ı had an AIDS check? Never
What do you consider to be	your primary health problem?
What do you sense will be	ome a health problem for you if you don't address it?
Are you satisfied with sex?	Yes No
What health problem of yo	irs reoccurs most frequently?
What would you consider h	iding from another about your health?
What pain/symptom are yo	u ignoring?
Circle	[1 = not good or poor 10 = very good or excellent]
Experience of health: Feeling of aliveness: Muscle tone: Elimination system: Diet: Hearing: Eyes: Teeth: Back: Neck: Knees:	[1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10] [1 2 3 4 5 6 7 8 9 10]

**Note:** Whenever you are stuck and wish to create space for an intention to manifest itself—complete an item on this list. Power is the rate at which you cycle through Start-Do-Complete.

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