LIFT MY BUSINESS CONFIDENCE ASSESSMENT

Assessment Overview

This assessment has been designed to provide real optics into where you should feel confidence and where you need additional development and support in your business foundation.

As you go through line-by-line, we ask that you consider the Confidence you feel with the **systems you already have in place**.

Please use the key for support as you rate each area, as well as total up each section & your overall score. If you are unclear about the content of a row, go ahead & give yourself a low score & make a note for yourself in the section provided.

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U	- unaware -	10	understanding	- 110	connaence

- 1 = minimal understanding haphazard approach low confidence
- 2 = some understanding minimal systems in place some confidence
- **3** = understanding some systems in place fair confidence
- **4** = understanding most systems in place confident
- **5** = strong understanding all systems in place very confident

Name:

LEGAL	0 - 5	NOTES
Incorporated & Maintaining Entity		
Written Agreements in Place		
Legally Compliant Team Structure		
Protected Intellectual Property		
Protected for Incapacity or Death		
Legal Total		of 25
INSURANCE	0-5	NOTES
Proper Home/ Auto Coverage		
Proper Health Coverage		
Proper Business Coverage		
Proper Life Coverage		
Community/ Network Support		
Insurance Total		of 25
FINANCIAL	0 - 5	NOTES
Money Map Numbers		
Historic - Expense Tracking		
Future - Financial Modeling		
Weekly Review of Reports		
Monthly & Quarterly Analysis		
Financial Total		of 25
TAX	0-5	NOTES
Current on Tax Filings		
Clarity on Tax Filings		
Proper Savings to Pay Taxes		
Current on Paying Taxes		
Strategy to Minimize Taxes		
Tax Total		of 25
LIFT My Business Confidence Score		of 100