

Decluttering Checklist: The R.E.A.L. Way

Home Vision Statement:

"I want my home to feel..."

R Review & Reset

Room/Area: _____

Purpose of this space:

- ☐ What do I want this room to feel like?
- ☐ What should I be able to do here?
- ☐ What's currently blocking that?

Vision for this space:

E Eliminate

- ☐ I have a donation box or trash bag ready
- ☐ I'm applying the one-touch rule (keep, toss, donate, relocate)
- ☐ I'm letting go of:
 - ☐ Unused items (over a year)
 - ☐ Broken or expired items
 - ☐ Guilt-based or obligation items
 - ☐ Items no longer fitting my lifestyle

Notable items I'm releasing today:

A Assign Time

Today's Focus Area: _____

- ☐ Timer set for _____ minutes
- ☐ This session is scheduled in my planner/calendar
- ☐ I completed today's goal

Checklist for the week:

- ☐ Monday: _____
 - ☐ Tuesday: _____
 - ☐ Wednesday: _____
 - ☐ Thursday: _____
 - ☐ Friday: _____
 - ☐ Weekend (optional): _____
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L List & Let Go

Declutter Areas List:

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Letting Go List (items, habits, or mindsets):

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Final Reflection

- ☐ I paused to thank God for the items I let go of
 - ☐ I feel lighter, more focused, and more at peace
 - ☐ I'm creating space for peace, purpose, and presence
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