

DAILY routine

NAME		WEEK OF	
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MORNING CHECKLIST

	M	T	W	T	F	S	S
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						

AFTERNOON CHECKLIST

	M	T	W	T	F	S	S
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						

EVENING CHECKLIST

	M	T	W	T	F	S	S
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						

