



DAILY PLANNER

Date: ___ / ___ / ___

MENU PLAN

BREAKFAST

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.....
.....

LUNCH

.....
.....
.....

DINNER

.....
.....

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WHAT HAVE WE RUN OUT OF / SHOPPING:

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.....
.....
.....

HEALTH & WELL BEING CHECKLIST:

- Ate:
 - 2 x fruit
 - 3 x vegetable
- Showered
- Moved my body
- Drank 2L of water
- Played with and talked to my kids

TOP 3 TASKS:

1.
.....

2.
.....

3.
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OTHER TASKS / HOUSEWORK:

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THINGS TO TELL MY PARTNER:

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WHAT I DID FOR ME:

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TODAY I AM GRATEFUL FOR:

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