

Make it happen

MON PLANNING DU JOUR

DATE :

PRIORITES

1. _____
2. _____
3. _____

TO DO LIST

- | | |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
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| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

CITATION DU JOUR

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GRATITUDE

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NOTES

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