

TODAY :

PRIORITY

IMPORTANT



SCHEDULE

TO DO LIST

7	_____	_____	<input type="checkbox"/>
8	_____	_____	<input type="checkbox"/>
9	_____	_____	<input type="checkbox"/>
10	_____	_____	<input type="checkbox"/>
11	_____	_____	<input type="checkbox"/>
12	_____	_____	<input type="checkbox"/>
1	_____	_____	<input type="checkbox"/>
2	_____	NOTES	
3	_____	_____	
4	_____	_____	
5	_____	_____	
6	_____	_____	

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Three horizontal lines for priority notes.

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