

# weekly plan



WEEK OF: \_\_\_\_\_

| EVENTS & APPOINTMENTS | MUST DO                  | M | T | W | T | F | S | S |
|-----------------------|--------------------------|---|---|---|---|---|---|---|
| MON                   |                          |   |   |   |   |   |   |   |
|                       |                          |   |   |   |   |   |   |   |
| TUE                   |                          |   |   |   |   |   |   |   |
|                       |                          |   |   |   |   |   |   |   |
| WED                   |                          |   |   |   |   |   |   |   |
|                       |                          |   |   |   |   |   |   |   |
| THU                   | SHOULD DO                |   |   |   |   |   |   |   |
|                       | <input type="checkbox"/> |   |   |   |   |   |   |   |
|                       | <input type="checkbox"/> |   |   |   |   |   |   |   |
| FRI                   | <input type="checkbox"/> |   |   |   |   |   |   |   |
|                       | <input type="checkbox"/> |   |   |   |   |   |   |   |
|                       | <input type="checkbox"/> |   |   |   |   |   |   |   |
| SAT                   | <input type="checkbox"/> |   |   |   |   |   |   |   |
|                       | <input type="checkbox"/> |   |   |   |   |   |   |   |
|                       | <input type="checkbox"/> |   |   |   |   |   |   |   |
| SUN                   | <input type="checkbox"/> |   |   |   |   |   |   |   |
|                       | <input type="checkbox"/> |   |   |   |   |   |   |   |
|                       | <input type="checkbox"/> |   |   |   |   |   |   |   |

| MEAL PLAN | SHOPPING LIST |
|-----------|---------------|
| M         |               |
| T         |               |
| W         |               |
| T         |               |
| F         |               |
| S         |               |
| S         |               |