

Today



PRIORITIES

MY DAY

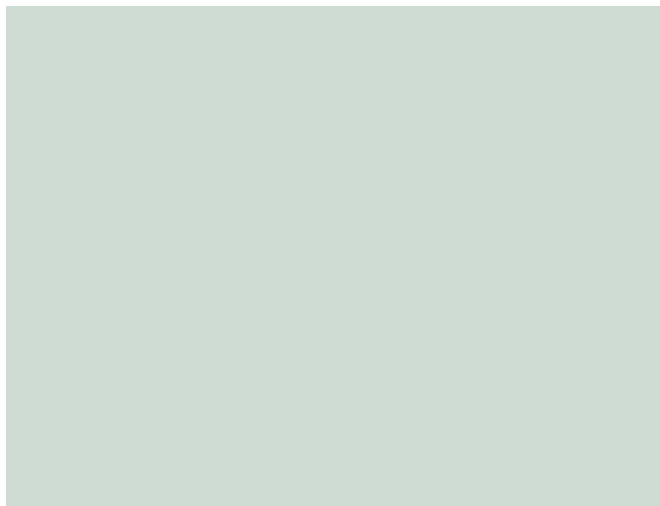
<input type="checkbox"/>	_____	6AM	_____
<input type="checkbox"/>	_____	7AM	_____
<input type="checkbox"/>	_____	8AM	_____

WOULD LIKE TO DO

<input type="checkbox"/>	_____	9AM	_____
<input type="checkbox"/>	_____	10AM	_____
<input type="checkbox"/>	_____	11AM	_____
<input type="checkbox"/>	_____	12PM	_____

IF I HAVE TIME

<input type="checkbox"/>	_____	1PM	_____
<input type="checkbox"/>	_____	2PM	_____
<input type="checkbox"/>	_____	3PM	_____
<input type="checkbox"/>	_____	4PM	_____



5PM	_____
6PM	_____
7PM	_____
8PM	_____
9PM	_____
10PM	_____
11PM	_____