Smoothie Habit Tracker

Day 1			
Date:			
My Smoothie Today:			
Did I ad	d greens today?		
□No	□Yes		
-	a new ingredient today?		
□No	□Yes		
If yes, w	hat was the new ingredient?		
How did	I feel after my smoothie?		
	·		
Notes / I	mprovements for tomorrow:		

Date:	
My Sm	oothie Today:
Did I ad □No	dd greens today? □Yes
Did I tr □No	y a new ingredient today? □Yes
If yes, v	what was the new ingredient?
How di	d I feel after my smoothie?
Notes /	Improvements for tomorrow:

Date:		
My Sm	oothie Today:	
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Dia 1 ad □No	dd greens today? □Yes	
□No	y a new ingredient today? □Yes what was the new ingredient?	
How di	d I feel after my smoothie?	
Notes /	Improvements for tomorrow:	_
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How d	d I feel after my smoothie?
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		_
Did I a □No	dd greens today? □Yes	
Did I to	y a new ingredient today?	
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If yes, v	what was the new ingredient?	
How di	d I feel after my smoothie?	
Notes /	Improvements for tomorrow:	_

Date:	
My Sm	oothie Today:
Did I a	dd greens today?
□No	□Yes
Did I tı	y a new ingredient today?
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If yes, v	what was the new ingredient?
How di	d I feel after my smoothie?
Notes /	Improvements for tomorrow:

Date:	
My Sn	noothie Today:
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□No	□Yes	
	ry a new ingredient today? □Yes	
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My Sm	oothie Today:
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Did I t	ry a new ingredient today?
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If yes, v	what was the new ingredient?
How d	d I feel after my smoothie?
Notes /	Improvements for tomorrow:

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new ingredient today?			
∃Yes			
feel after my smoothie?			
provements for tomorrov	v:		
	greens today? Yes new ingredient today? Yes t was the new ingredient? feel after my smoothie?	greens today? Yes new ingredient today? Yes t was the new ingredient? feel after my smoothie?	greens today? Yes new ingredient today? Yes t was the new ingredient? feel after my smoothie?

Date: _	
My Sn	oothie Today:
D:11	
Did I a □No	ld greens today? □Yes
Did I t	y a new ingredient today?
	□Yes
If yes,	hat was the new ingredient?
How d	d I feel after my smoothie?
Notes /	Improvements for tomorrow:

Date: _	
My Sm	oothie Today:
Did I a	dd greens today?
□No	□Yes
Did I tr	ry a new ingredient today?
□No	□Yes
If yes, v	what was the new ingredient?
How di	d I feel after my smoothie?
Notes /	Improvements for tomorrow:

Date:		
My Smo	oothie Today:	
		_
Did I ad	d greens today?	
□No	□Yes	
D: J I 4		
Dia i try □No	y a new ingredient today? □Yes	
□NO	□ res	
If yes, w	hat was the new ingredient?	
How did	I I feel after my smoothie?	
Notes / 1	Improvements for tomorrow:	

Date:				
My Smoothie	Today:			
Did I add gre				
□No □Y	es			
Did I try a ne	w ingredient tod	ay?		
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	as the new ingred			
	l after my smoot			
Notes / Impro	ovements for tom	orrow:		

Date: _				
My Smo	oothie Today:			
	ld greens today?			
□No	□Yes			
Did I tr	y a new ingredient today?			
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	_ 100			
If yes, w	hat was the new ingredient?			
How di	d I feel after my smoothie?			
Notes /	Improvements for tomorro	w:		
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Date:	
My Smoo	othie Today:
	greens today?
□No	□Yes
Did I try	a new ingredient today?
□No	□Yes
If yes, wh	at was the new ingredient?
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Notes / Ir	nprovements for tomorrow:

Date: _	
My Smoothie Today:	
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