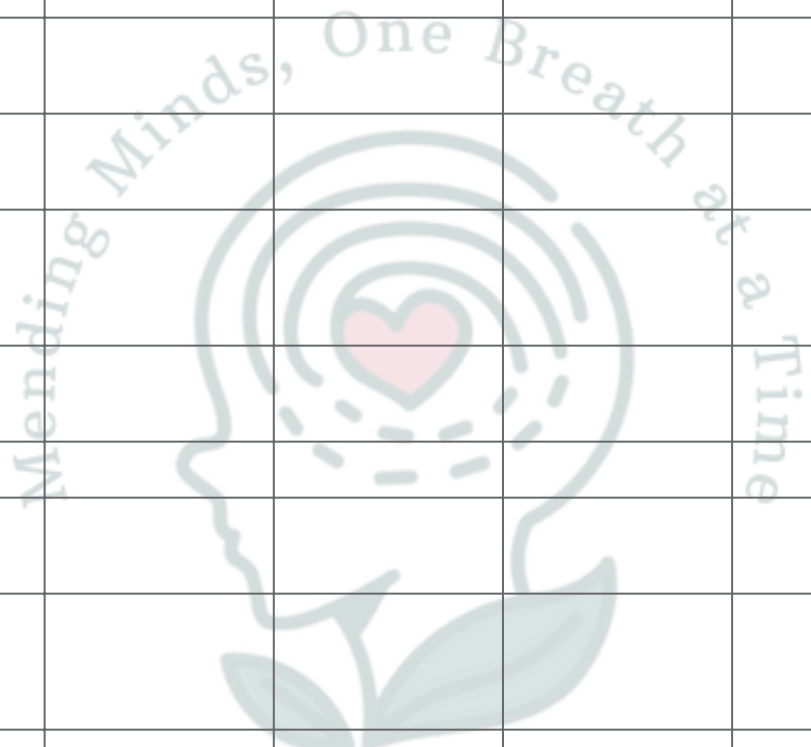


DAY								
Mood level during day (1-10) 10 worst								
What did I do today? (1-10) 10 very active								
Naps taken (duration, time)								
Caffeine, alcohol, nicotine intake today								
What did I do just before bed?								
Time went to bed								
Average time took to fall asleep								
Did I wake up in the night, if so how many times?								
How many hours did I sleep?								
What time did I get out of bed?								
How do I feel this morning? (1-10) 10 good								
Add any additional notes here								



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