

# The Masculine Foundry Daily Habit Tracker

Sunday			Monday		
<b>Habit 1</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 1</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
<b>Habit 2</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 2</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
<b>Habit 3</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 3</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
Tuesday			Wednesday		
<b>Habit 1</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 1</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
<b>Habit 2</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 2</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
<b>Habit 3</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 3</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
Thursday			Friday		
<b>Habit 1</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 1</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
<b>Habit 2</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 2</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
<b>Habit 3</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent	<b>Habit 3</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent
Saturday			Thoughts:		
<b>Habit 1</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent			
<b>Habit 2</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent			
<b>Habit 3</b>	Did you Do it? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Effort Level <input type="checkbox"/> Minimum <input type="checkbox"/> OK <input type="checkbox"/> Excellent			