My Daily Report

Name: _____________
Date: ______________

Today We: _______________________

Today I Was:
Happy ___  Sick ___
Tired ___  Grumpy ___
Other _______________________

I Played Outside:
Yes ___  No ___

Naptime: From ___ to ___
Did Not Sleep ___

For Lunch We Had: _______________________

I Ate: All ___  Good ___  Not Much ___

Comments: _______________________

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Comments: ____________________________
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Tired From Did Not Sleep ___

Comments: ____________________________

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