

# Daily Time Block

**NAME:**

TIME BLOCK		TODAY'S DATE	
7 AM			
8 AM			
9 AM			
		TOP PRIORITIES / TO-DO	
10 AM		1	<input type="checkbox"/>
11 AM		2	<input type="checkbox"/>
12 N		3	<input type="checkbox"/>
1 PM		4	<input type="checkbox"/>
2 PM		5	<input type="checkbox"/>
3 PM		6	<input type="checkbox"/>
4 PM		7	<input type="checkbox"/>
5 PM		8	<input type="checkbox"/>
6 PM		9	<input type="checkbox"/>
7 PM		10	<input type="checkbox"/>

**NOTES**

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9 PM		9	<input type="checkbox"/>
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