Name: _____

Date: ____/____/_____

	0-5 min	6-11 min	12-17 min	18-23 min	24-29 min	30-35 min	36-41 min	42-47 min	48-53 min	54-59 min
9 a										
10 a										
11 a										
12 p										
1 p										
2 p										
3 p										
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5 p										
6 p										

To Do List. Unlabeled Tasks.

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Tasks Accomplished. Labeled.

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