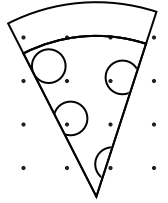
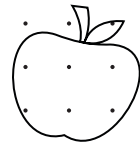
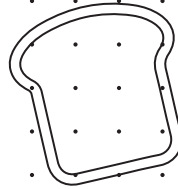


meal planner



MONDAY
B:
L:
D:
SNACKS:

TUESDAY
B:
L:
D:
SNACKS:

WEDNESDAY
B:
L:
D:
SNACKS:

THURSDAY
B:
L:
D:
SNACKS:

FRIDAY
B:
L:
D:
SNACKS:

SATURDAY
B:
L:
D:
SNACKS:

SUNDAY
B:
L:
D:
SNACKS:

FOOD GOALS

INGREDIENTS ON HAND

<input type="checkbox"/> _____	<input type="checkbox"/> _____
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GROCERY LIST

BUDGET: _____

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