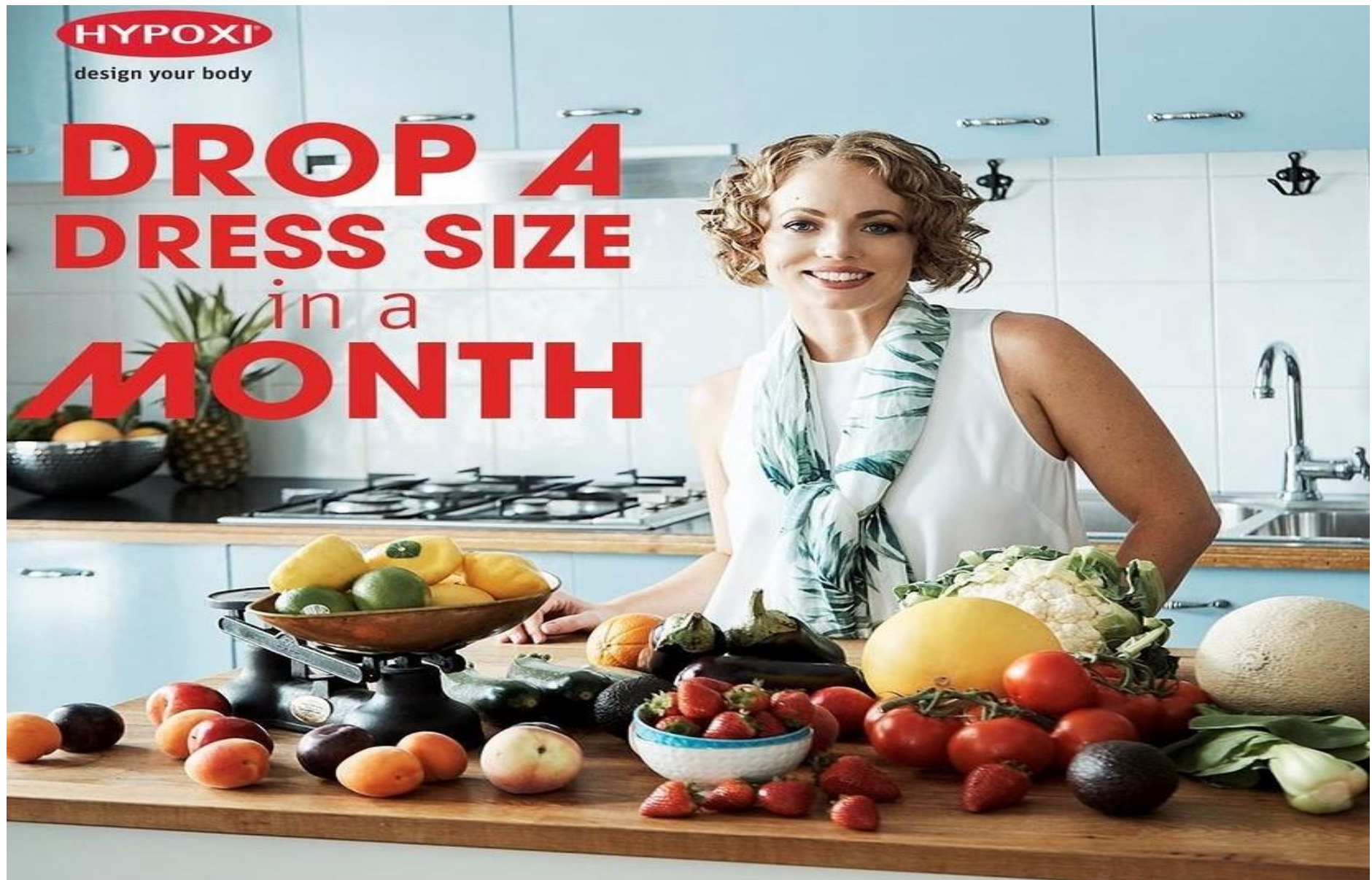


HYPOXI

design your body

DROP A DRESS SIZE in a MONTH



NAME: _____

DATE: _____

Caffeine/Tea: _____

Water Intake today: _____

Exercise today (Type & Duration): _____

Alcohol: _____

	Time	Qty	Item
Breakfast (Meal 1)			
Snack (Meal 2)			
Lunch (Meal 3)			
Snack (Meal 4)			
Dinner (Meal 5)			

NOTES: