

Intentions This Week

Date: _____

	Name	Name
I need physically	<input type="checkbox"/>	<input type="checkbox"/>
I need emotionally	<input type="checkbox"/>	<input type="checkbox"/>
I want	<input type="checkbox"/>	<input type="checkbox"/>
My priority for work is	<input type="checkbox"/>	<input type="checkbox"/>
My priority for relationships is	<input type="checkbox"/>	<input type="checkbox"/>
My priority for soul-care is	<input type="checkbox"/>	<input type="checkbox"/>
My spouse would feel loved by	<input type="checkbox"/>	<input type="checkbox"/>
My intention / mantra is	<input type="checkbox"/>	<input type="checkbox"/>