

# My Teeth Brushing Schedule



My Name: \_\_\_\_\_

Month: \_\_\_\_\_

Week 1

Week 2

Week 3

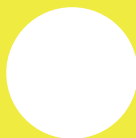
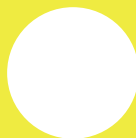
Week 4



Monday



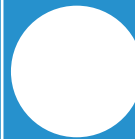
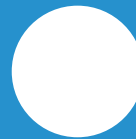
Tuesday



Wednesday



Thursday



Friday



Saturday



Sunday

