



DON'T JUST TAKE OUR WORD FOR IT.

Try our free journal and see for yourself.

Record your experience for one week and see what you notice. Stick with it for six months and be amazed.

Generally, how do you fe	eel?			y phys nsion?		e?		Des	scribe	e your	state (of mind	. H	low ar	e you s	sleepin	g?			Desc	ribe a	ny lac	k of cl	larity.				
											W	EEKLY	STA	TUS														
Describe your day in	DAY 1				DAY 2				DAY 3									DAY 5			DAY 6				DAY			
a few words. Write down any notable or unusual, experiences (thoughts, actions, events, emotions, etc.)																												
How many times per day you used the essences (check one)	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+
						Q	UESTI	ONS	(to be	e fille	d out	at the	begi	nning	of the	e wee	k)											
Generally, how do you fe	eel?		An	y phys	ical te	ension	?	Des	scribe	e your	state (of mind	. Н	ow ar	e you s	sleepin	g?			Desc	ribe a	ny enł	nance	d clarit	y.			
											W	EEKLY	STA	TUS														
Describe your day in	DAY 1			7 1 DAY 2					DA	Y 3			DA	Y 4			DA	Y 5			DA	Y 6			DAY	f 7		
a few words. Write down any notable or unusual, experiences (thoughts, actions, events, emotions, etc.)																												
How many times per day you used the essences (check one)	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	□ 3-4	□ 5+	0	□ 1-2	3-4	□ 5+

QUESTIONS (to be filled out at the beginning of the week)

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Generally, how do you fe	eel?	Any p	hysica	tens							at the b				leepin				Desci	ibe a	ny enh	nance	d clarit	ty.							
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Describe your day in	DAY 1	' 1			DAY 1			DAY 1			DAY 2			DAY 3				DAY 4			DAY 5			DAY 6			DAY 7				
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				_																											
					QUE	ESTI	ONS (to be	filled	l out a	at the b	egir	nning	of the	weel	k)															
Generally, how do you feel? Any physical tension						ny physical tension?					n? Describe your state of mind						How are you sleeping?						Describe any enhanced clarity.								_

WEEKLY STATUS DAY 2 DAY 3 DAY 4 DAY 7 Describe your day in DAY 1 DAY 5 DAY 6 a few words. Write down any notable or unusual, experiences (thoughts, actions, events, emotions, etc.) How many times per 0 1-2 3-4 5+ 0 1-2 3-4 5+ 0 1-2 3-4 5+ 0 1-2 3-4 5+ day you used the 0 1-2 3-4 5+ 0 1-2 3-4 5+ 0 1-2 3-4 5+ essences (check one)

Congratulations!

You have completed a full month of Quiet Mind. Reflect and write about any changes in your experiences of clarity, efficiency, deep sleep, relaxation, ability to let things go and be in the moment. And what's next? Keep evolving at www.lotuswei.com

NOTES:			