Name: _____

Department:_____

WellPoints Water Log Sheet

Required: 4 8oz glasses of water per day; 4 days a week

Points: 3 points per week

Note: Must be PURE water; no sweetners, flavorings, etc.

Water (specify # of glasses each day)							Total # of glasses	
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of :								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		
Week of:								
S	**M**	**T**	**W**	**TH**	**F**	**S**		