

April 2024



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> APRIL FOOL'S DAY	2  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> CHILDREN'S BOOK DAY	3  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	4  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	5  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	6  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>
7  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	8  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	9  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	10  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> SIBLINGS DAY	11  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	12  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> GRILLED CHEESE DAY	13  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>
14  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> LOOK UP AT THE SKY DAY	15  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	16  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	17  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	18  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	19  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	20  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>
21  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	22  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> PASSOVER BEGINS EARTH DAY	23  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> WORLD BOOK DAY	24  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	25  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	26  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	27  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>
28  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	29  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	30  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> PASSOVER ENDS				

Check off each of the 2 boxes every time you brush.
 Make it a habit for a great smile!