QUANTIFY YOUR TRAINING

Core, Chest, Arm (Full UB) Workout

DAY:	DATE:	TIME:	TIME:	
LENGTH OF WORKOUT:				am/pm
MOOD WHEN STA	ARTING:			
	e spaces below, fill in the weight yo ı would write "100 X 10". The gray t	poxes below are not used.		
	EXERCISE	Set #1	Set #2	Set #3
Ab Crunches				
Seated Dumbbel				
Stability Ball Rol	lout			
Dumbbell Row				
Stability Ball Dou	ıble Leg Drop			
Tricep Kickback			 	
Hammers	D			
Seated Shoulder				
C's Ab-Leg Bung Lying Dumbbell I				
Lying Dunibben i	· iy	<u> </u>		<u> </u>
Nutrition, rest, worko	ut notes:			