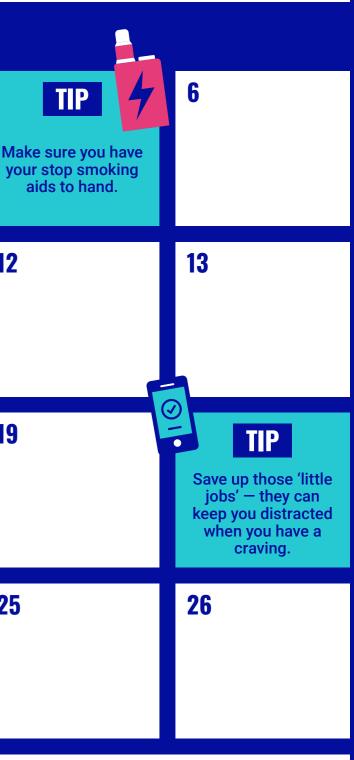


MY QUIT JOURNEY

MONTH **MY QUIT DATE**

		(C)				
1	2	TIP Make a list of your reasons for quitting – keep them to hand to remind you.	3	4	5	M
7	8	9	10	11	+ TIP Remember the 4 Ds if you get a craving: 1. Delay 2. Distract 3. Deep breathing 4. Drink water	12
14	Put the money you would have spent on tobacco in a jar – watch that money build up.	15	16	17	18	19
20	21	22	TIP Plan ahead for how you will manage when you are around smokers.	23	24	25
27	28	29	30	TIP Don't forget! Take the time to reward yourself for being smokefree.	31	No





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