| Measuring My Success with OsoLean™ |       |        |        |        |        |        |        |        |        |
|------------------------------------|-------|--------|--------|--------|--------|--------|--------|--------|--------|
|                                    | Start | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 |
| Date / Day Measured                |       |        |        |        |        |        |        |        |        |
| Neck                               |       |        |        |        |        |        |        |        |        |
| Bust (@ nipples)                   |       |        |        |        |        |        |        |        |        |
| Chest (under breast for women)     |       |        |        |        |        |        |        |        |        |
| Waist                              |       |        |        |        |        |        |        |        |        |
| Tummy (at belly button)            |       |        |        |        |        |        |        |        |        |
| Hip                                |       |        |        |        |        |        |        |        |        |
| R Thigh ( in. from floor)          |       |        |        |        |        |        |        |        |        |
| L Thigh ( in. from floor)          |       |        |        |        |        |        |        |        |        |
| R Knee                             |       |        |        |        |        |        |        |        |        |
| L Knee                             |       |        |        |        |        |        |        |        |        |
| R Calf                             |       |        |        |        |        |        |        |        |        |
| L Calf                             |       |        |        |        |        |        |        |        |        |
| R Ankle                            |       |        |        |        |        |        |        |        |        |
| L Ankle                            |       |        |        |        |        |        |        |        |        |
| R Upper Arm at armpit              |       |        |        |        |        |        |        |        |        |
| L Upper Arm at armpit              |       |        |        |        |        |        |        |        |        |
| R Forearm                          |       |        |        |        |        |        |        |        |        |
| L Forearm                          |       |        |        |        |        |        |        |        |        |
| R Wrist                            |       |        |        |        |        |        |        |        |        |
| L Wrist                            |       |        |        |        |        |        |        |        |        |
| Weight                             |       |        |        |        |        |        |        |        |        |

Try to weigh and measure the same time every week. Some weeks you will not lose pounds but you will notice a change on the measuring tape.