

Tracking Sheet for 100 faces — print 4 sheets

Your Name: _____ Goal Start Date: _____ Goal End Date: _____

	Date	Customer Name	Amount Sold (put in appropriate column)		
			Facial/ Double Facial	Guest at Sales Meeting (tries/ experiences	Skin Care Class
1					
2					
3					
4					
5					
6					
7					
8					
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