

Body Composition Results

Client Name _____ Short-term Goal: _____ lbs/_____ % body fat By: _____/_____/_____

Long-term Goal: _____ lbs/_____ % body fat By: _____/_____/_____

LEANPower!®	Date	Date	Date	Date	Date	Date
Body Weight						
Body Fat %						
Lean Weight						
Fat Weight						
Waist						
Abdominal						
Hip						
Thigh						
Biceps						
Chest						
Calf						