



Food & Activity Diary

Write Down Everything You Eat, Drink and Do, Every Day!

Week Ending: _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast							
Morning Snack							
Lunch							
Afternoon Snack							
Dinner (Lean/Green Meal) When recording your food intake, be specific regarding portion size.							
Evening Snack							
Water Intake (Min. 8 cups/day)	1 5	2 6	3 7	4 8	1 5	2 6	3 7
Exercise Activity							