FOOD JOURNAL: Make 30 copies of this page, or use this format in a notebook to record what you eat, when, and how much.

Date:
Breakfast
Time:
Food:
Beverage:
Lunch
Time:
Food:
Beverage:
Snack
Time:
Food:
Beverage:
Dinner
Time:
Food:
Beverage:
TOTAL SERVINGS OF:
Carbs:
Protein:
Fat: