

# FOOD JOURNAL

TODAY'S GOAL AND/OR AFFIRMATION:

NAME: \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 DAY: M T W Th F Sa Su

TIME	FOOD AND QUANTITY	DP	B/MP	F/V	G/O	HUNGER SCALE	MOOD, THOUGHTS AND/OR FEELINGS
						0 1 2 3 4 5 6 7 8 9 10 	

**EXERCISE:** \_\_\_\_\_

Graph hunger level from start to end of meal

0 = Empty  
 5 = Neutral  
 10 = Stuffed

**TOTALS**

**RECOMMENDED**

DP = Dairy Protein  
 B/MP = Bean / Meat Protein  
 F/V = Fruit / Vegetable  
 G = Grain  
 O = Others