Daily Food Journal

Please document in detail your daily food consumption.

We ask that you do not submit this intake until completion of Day 7, until then you can simply save the journal and access it again using the original link. Once you have completed all 7 days please click the submit form button at the bottom. Lou will analysis the journal and send an email with her advise shortly.

1. Day 1

Date	What time did you wake	up?
Time	Breakfast	
Time	Mid Morning Snack	
Time	Lunch	
Time	Mid Afternoon Snack	
 Time	Dinner	
Time	Evening Snack	
What time did you go to	sleep?	Did you workout today? If so, what time and was it cardio or strength?

How many ounces of water did you consume?

2. Day 2

Date	What time did you wake up?
Time	Breakfast
Time	Mid Morning Snack
Time	Lunch
Time	Mid Afternoon Snack
Time	Dinner

What time did you go to sleep?

Did you workout today? If so, what time and was it cardio or strength?

How many ounces of water did you consume?

3. Day 3

Date	What time did you wake	up?
Time	Breakfast	
Time	Mid Morning Snack	
Time	Lunch	
Time	Mid Afternoon Snack	
Time	Dinner	
Time	Evening Snack	
What time did you go to	sleep?	Did you workout today? If so, what time and was it cardio or strength?

How many ounces of water did you consume?

4. Day 4

Date	What time did you wake up?
Time	Breakfast
Time	Mid Morning Snack
Time	Lunch
Time	Mid Afternoon Snack
Time	Dinner

What time did you go to sleep?

Did you workout today? If so, what time and was it cardio or strength?

How many ounces of water did you consume?

5. Day 5

Date	What time did you wake	up?
Time	Breakfast	
Time	Mid Morning Snack	
Time	Lunch	
Time	Mid Afternoon Snack	
Time	Dinner	
Time	Evening Snack	
What time did you go to	sleep?	Did you workout today? If so, what time and was it cardio or strength?

How many ounces of water did you consume?

6. Day 6

Date	What time did you wake up?
Time	Breakfast
Time	Mid Morning Snack
Time	Lunch
Time	Mid Afternoon Snack
Time	Dinner

What time did you go to sleep?

Did you workout today? If so, what time and was it cardio or strength?

How many ounces of water did you consume?

7. Day 7

Date	What time did you wa	ake up?	
Time	Breakfast		
Time	Mid Morning Snack	Mid Morning Snack	
Time	Lunch	- Lunch	
Time	Mid Afternoon Snack	Mid Afternoon Snack	
Time	Dinner	Dinner	
Time	Evening Snack	Evening Snack	
What time did you go to sleep?		Did you workout today? If so, what time and was it cardio or strength?	

How many ounces of water did you consume?