Daily Record of Food Intake | Your diet may be the key to better health.

Each day, record all the items you eat and drink. Be sure to include the approximate amount of each item. When you have completed this form, return it to your health care professional for evaluation.



Name:		
Day 1 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		
fegetables & Fruits:		
reads, Cereals, & Grains:		
ats (butter, margarine, oils, etc.):		
Candy, Sweets, & Junk Food:		
Vater Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
Snack:		
Bowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
		-
Day 2 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		
/egetables & Fruits:		
Breads, Cereals, & Grains:		
Fats (butter, margarine, oils, etc.):		
Candy, Sweets, & Junk Food:		
Vater Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
Snack:		
Bowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
Day 3 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		
egetables & Fruits:		
Breads, Cereals, & Grains:		
ats (butter, margarine, oils, etc.):		
Candy, Sweets, & Junk Food:		
Vater Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
inack:		
Bowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
Notes:		- 4 - Constant Association
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Day 4 - Date: BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:	LONGI TIME:	DINNER Lime:
egetables & Fruits:		
reads, Cereals, & Grains:		
ats (butter, margarine, oils, etc.):		
andy, Sweets, & Junk Food:		
Vater Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
Snack:		
Bowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
Day 5 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		LINE.
egetables & Fruits:		
Breads, Cereals, & Grains:		
iats (butter, margarine, oils, etc.):		
Candy, Sweets, & Junk Food:		
Vater Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
Snack:	me on ouron talle.	MOTITIBLE OBTOR TIME:
Bowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
Day 6 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		
egetables & Fruits:		
reads, Cereals, & Grains:		
ats (butter, margarine, oils, etc.):		
Candy, Sweets, & Junk Food:		
Vater Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
State Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
Day 7 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Neat & Dairy:		
egetables & Fruits:		
reads, Cereals, & Grains:		
ats (butter, margarine, oils, etc.):		
ats (butter, margarine, oils, etc.): Candy, Sweets, & Junk Food: Vater Intake (fl. oz.):		
Candy, Sweets, & Junk Food: Vater Intake (fl. oz.):		
andy, Sweets, & Junk Food: Vater Intake (fl. oz.): Other Drinks:	MID-DAY SNACK Time	NIGHTTIMF SNACK Time.
Candy, Sweets, & Junk Food:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time: