



FOOD DIARY

Put the day of the week in the empty box above Meal 1. Fill out everything you eat or drink, daily for at least one week, or better, two weeks. It is not necessary to weigh or measure your food, simply record the name and approximate size, 2 cups salad, 1 handful almonds, etc. Please fill out How Do You Feel?, briefly, in one or two words. This section will give you clues about what you should and should not eat. Just reprint this form as many times as you need. Tip: If you change the way you eat during the Food Diary process, consider this a clue to your problems. Most people instinctively know which foods cause problems, and these foods should be removed from your diet. If you feel a food is causing you problems, don't eat it!

	WHAT DID YOU EAT OR DRINK TODAY?	HOW DO YOU FEEL?
MEAL 1 What time?		
MEAL 2 What time?		
MEAL 3 What time?		
MEAL 4 What time?		
MEAL 5 What time?		
MEAL 6 What time?		

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