

# Food Journal

**Day Three**

**Date:**

Meal	Food / Drink	Time of day	Portion size
<b>Breakfast</b>			
<b>Lunch</b>			
<b>Dinner</b>			
<b>Snacks</b>			

## WATER GOAL

Eight – 8 ounce glasses per day  
(*check each glass*)



## How Did I Do Today?

Excellent

Great

Ok

Not Good

Very Bad