

## Food Log

DATE/TIME	FOOD/BEVERAGE	HUNGER LEVEL 0-4	SITUATION: place/activity	COMMENT: emotional/physical/mood
<b>PRE: BREAKFAST</b>				
beverages				
<b>BREAKFAST</b>				
beverages				
<b>A.M. SNACKS</b>				
beverages				
<b>LUNCH</b>				
beverages				
<b>P.M. SNACKS</b>				
beverages				
<b>DINNER</b>				
beverages				
<b>EVENING SNACKS</b>				
beverages				