

1- DAY FOOD LOG



Advanced Wellness Center
Changing Lives Naturally!

NAME: _____ Today's Date: _____

**Please list what you ate YESTERDAY.
Thank you.**

TIME YOU ATE **BREAKFAST**: _____

WHAT YOU ATE:

TIME YOU ATE **LUNCH**: _____

WHAT YOU ATE.

TIME YOU ATE **DINNER**: _____

WHAT YOU ATE:

Any Snacks throughout the day?

Please record the snack(s) and time of day you ate it.