## Daily Food Diary - Date:_____

| Time | Food or Drink | Serving Size | Hunger Level (1=starving, 5=full) | Mood | Alone or with others | Where |
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Drank Water ☐☐☐☐☐☐☐☐

Multi-Vitamin ☐

Exercise_____

***Looking for new & healthy menu ideas?***

*Search from 10,000 recipes at dLife.com/recipes.*