Core InteRvention

DAILY FOOD LOG

no rules…..only choices

DAY/DATE: _____ **Name:** _____

TIME	FOOD/DRINK/QTY	CAL	FAT	CARB	PRO	FIB	SUG	SOD
	Total							
	%							

Cardio _____ **min** _____ **Calories Burned**

Copyright © 2007 - 2008, Core Intervention