
Elite Health & Fitness Training, Inc.

DAILY FOOD JOURNAL

Day # _____ Date: _____

Client Name: _____

Meal	Hunger Rating (0-10)	Time/Where	Energy Level	Attitude
1		/		
Food Consumed:				

Meal	Hunger Rating (0-10)	Time/Where	Energy Level	Attitude
2		/		
Food Consumed:				

Meal	Hunger Rating (0-10)	Time/Where	Energy Level	Attitude
3		/		
Food Consumed:				

Meal	Hunger Rating (0-10)	Time/Where	Energy Level	Attitude
4		/		
Food Consumed:				

Meal	Hunger Rating (0-10)	Time/Where	Energy Level	Attitude
5		/		
Food Consumed:				

Meal	Hunger Rating (0-10)	Time/Where	Energy Level	Attitude
6		/		
Food Consumed:				