

NUTRITIONAL INTAKE LOG

Date: _____

MEAL	FOOD & BEVERAGE DESCRIPTION	CALORIES	PROTEIN	CARBS/FAT
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Breakfast

**Morning
Snack**

Lunch

**Afternoon
Snack**

Dinner

**Evening
Snack**

WATER INTAKE (8OZ GLASS)

DAILY TOTALS

Cals: _____

Protein: _____

DAILY NOTES & SYMPTOMS

Record energy levels, digestive responses, or exercise...