

# Daily Food Log

Date: \_\_\_\_\_

Su M Tu W Th F Sa

Weight: \_\_\_\_\_

Sleep: \_\_\_\_\_

Time	Qty	Food	Calories	Carbs	Sugar	Fat
Total:						

### Blood Sugar Level and Blood Pressure

Time	Notes	Level	SBP	DBP

### Water (1 cup per circle)



Exercise/Activity	Time	Dist	Wght	Reps

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