

**Record your intake for two days including meals and snacks.
Include one day's intake of special or unusual meals and snacks.**

DAY 1:			DAY 2:		Special or Unusual Meals and snacks	
TIME	AMOUNT	FOOD/DRINK	AMOUNT	FOOD/DRINK	AMOUNT	FOOD/DRINK
Breakfast						
Snacks						
Lunch						
Snacks						
Dinner						
Snacks						

Comments:

Comments:

Comments: