

**Weight Loss Diary - Page 1**

**Week:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Start Weight:** \_\_\_\_\_ **End Weight:** \_\_\_\_\_

**Key 1: Eat right!** *Track the time and content of each meal*

<b>Monday</b>	<b>Time</b>	<b>Type of Meal</b>
Meal 1:		
Snack 1:		
Meal 2:		
Snack 2:		
Meal 3:		

<b>Tuesday</b>	<b>Time</b>	<b>Type of Meal</b>
Meal 1:		
Snack 1:		
Meal 2:		
Snack 2:		
Meal 3:		

<b>Wednesday</b>	<b>Time</b>	<b>Type of Meal</b>
Meal 1:		
Snack 1:		
Meal 2:		
Snack 2:		
Meal 3:		

<b>Thursday</b>	<b>Time</b>	<b>Type of Meal</b>
Meal 1:		
Snack 1:		
Meal 2:		
Snack 2:		
Meal 3:		

<b>Friday</b>	<b>Time</b>	<b>Type of Meal</b>
Meal 1:		
Snack 1:		
Meal 2:		
Snack 2:		
Meal 3:		

<b>Saturday</b>	<b>Time</b>	<b>Type of Meal</b>
Meal 1:		
Snack 1:		
Meal 2:		
Snack 2:		
Meal 3:		

<b>Sunday</b>	<b>Time</b>	<b>Type of Meal</b>
Meal 1:		
Snack 1:		
Meal 2:		
Snack 2:		
Meal 3:		

**Weight Loss Diary - Page 2**

**Week:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Start Weight:** \_\_\_\_\_

**End Weight:** \_\_\_\_\_

--> Track your exercise, supplement and weight loss motivation for each day!

<u>Monday</u>	Type
Key 2 - Exercise right:	_____
Key 3 - Supplements:	_____
Key 4 - Best thing today:	_____
Key 4 - Well-being today:	_____

<u>Tuesday</u>	Time	Type
Key 2 - Exercise right:	_____	_____
Key 3 - Supplements:	_____	_____
Key 4 - Best thing today:	_____	_____
Key 4 - Well-being today:	_____	_____

<u>Wednesday</u>	Time	Type
Key 2 - Exercise right:	_____	_____
Key 3 - Supplements:	_____	_____
Key 4 - Best thing today:	_____	_____
Key 4 - Well-being today:	_____	_____

<u>Thursday</u>	Time	Type
Key 2 - Exercise right:	_____	_____
Key 3 - Supplements:	_____	_____
Key 4 - Best thing today:	_____	_____
Key 4 - Well-being today:	_____	_____

<u>Friday</u>	Time	Type
Key 2 - Exercise right:	_____	_____
Key 3 - Supplements:	_____	_____
Key 4 - Best thing today:	_____	_____
Key 4 - Well-being today:	_____	_____

<u>Saturday</u>	Time	Type
Key 2 - Exercise right:	_____	_____
Key 3 - Supplements:	_____	_____
Key 4 - Best thing today:	_____	_____
Key 4 - Well-being today:	_____	_____

<u>Sunday</u>	Time	Type:
Key 2 - Exercise right:	_____	_____
Key 3 - Supplements:	_____	_____
Key 4 - Best thing today:	_____	_____
Key 4 - Well-being today:	_____	_____

**Comments / Notes:**

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