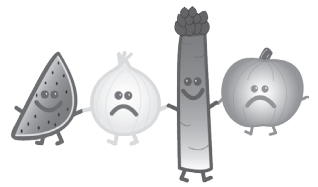


Food'n'Mood

JOURNAL



Date: _____

Mon Tue Wed Thurs Fri Sat Sun

Weight: _____

Check # 8 ounce glasses of water:



Time	Place	Food/Beverage	How Much	Mood Before	Mood After

What's your Mood: exhausted, angry, sad, frustrated, stressed, depressed, overwhelmed, anxious, lonely, jealous, bored, hopeful, confident, happy, thrilled, etc.

My Day in Review: (Times/situations/moods likely to cause cravings, types of food most likely to crave, etc.):

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Behaviors that require my attention:

.....
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Notes:

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How I did today: Fabulous Great OK Will Do Better Tomorrow