

# 5G MEAL PLAN TRACKER

SCHEDULE	FOODS EATEN	CALORIES	SUPPLEMENTS
BREAKFAST			
MID-MORNING SNACK			
LUNCH			
AFTERNOON SNACK			
DINNER			
30 MINUTES BEFORE BED			
TOTALS	HOW MANY DIFFERENT TIMES DID I EAT TODAY? _____	TOTAL CALORIES _____	DID I TAKE ALL MY SUPPLEMENTS YES      NO