

Weight \_\_\_\_\_ **Daily Menu** \_\_\_\_\_ Date

**Breakfast**

**Lunch**

**Dinner**

**Snacks**

**Challenges/Successes**

8 Proteins  5 Breads  2 Milk   
4 Vegetables  3 Fruits  3 Fats   
10 Water  3 or 4 Free

Exercise \_\_\_\_\_ Bible \_\_\_\_\_

Pray \_\_\_\_\_ Medicine  Dishes

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