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|  |  FOOD JOURNALName\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_ |

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| Write down everything you eat and drink for three days, including all snacks, beverages, and water. Please include approximate amounts. If you notice any mood or digestive changes associated with a meal/snack, record it in the right-hand column. |
| **Meal** | **Beverages** | **Mood/Digestive Changes** |
| Breakfast (Time: ) |  |  |
| Snacks (Time: ) |  |  |
| Lunch (Time: ) |  |  |
| Snacks (Time: ) |  |  |
| Dinner (Time: ) |  |  |
| Snacks (Time: ) |  |  |

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