

My Weight Loss

WEEK

Name _____ Start Date _____

Notes	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Today's Weight	_____	_____	_____	_____	_____	_____	_____
Weight Goal	_____	_____	_____	_____	_____	_____	_____
Weight Lost	_____	_____	_____	_____	_____	_____	_____
Weight Gained	_____	_____	_____	_____	_____	_____	_____
Breakfast	_____	_____	_____	_____	_____	_____	_____
Lunch	_____	_____	_____	_____	_____	_____	_____
Snack	_____	_____	_____	_____	_____	_____	_____
Dinner	_____	_____	_____	_____	_____	_____	_____
Fluids	_____	_____	_____	_____	_____	_____	_____
Exercise	_____	_____	_____	_____	_____	_____	_____
Sleep	_____	_____	_____	_____	_____	_____	_____