

| Name : | | Week: | Day: | Date: / / | |
|--------|--------------|---------------|-------------------|-----------|---|
| Time | Food / Drink | Who/ where | Mood/ thoughts | H | F |
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Hunger/Fullness Scale:

1=Ravenous, 2=Very hungry, 3=Hungry, 4=Slightly hungry, 5=Neutral, 6=Feeling satisfied, 7=Full, 8=Very full, 9=Feeling sick