## See where you're at and PLAN YOUR PROGRESS!

Identify your food type(s). You can write in the food, glycemic count & calories if you'd like. Customize for your own personal goals! **CC:** Complex Carbs; **SC:** Simple Carbs; **GF:** Good Fats; **LP:** Lean Protein (refer to **General Lifestyle Nutrition Goals** for examples)

DAY OF	MEAL 1	MEAL 2	MEAL 3	MEAL 4	MEAL 5	MEAL 6	TOTALS
WEEK	(Breakfast)	(Snack)	(Lunch)	(Snack)	(Dinner)	(Snack)	
MONDAY	CC SC GF LP						
	CC SC GF LP						
	CC SC GF LP						
TUESDAY	CC SC GF LP						
	CC SC GF LP						
	CC SC GF LP						
WEDNESDAY	CC SC GF LP						
	CC SC GF LP						
	CC SC GF LP						
THURSDAY	CC SC GF LP						
	CC SC GF LP						
	CC SC GF LP						
FRIDAY	CC SC GF LP						
	CC SC GF LP						
	CC SC GF LP						
SATURDAY	CC SC GF LP						
	CC SC GF LP						
	CC SC GF LP						
SUNDAY	CC SC GF LP						
	CC SC GF LP						
	CC SC GF LP	Vaud ita aan					

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