

Snohomish Midwives
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Daily Nutrition and Exercise Log

1. Please record EVERYTHING you eat and drink for 5 days in a row.
2. Write down the type of exercise you participated in & how long you exercised for.

DAY 1	Breakfast	Lunch	Dinner	Snacks
Date ___/___				
Exercise Herbs Vitamins				

DAY 2	Breakfast	Lunch	Dinner	Snacks
Date ___/___				
Exercise Herbs Vitamins				

DAY 3	Breakfast	Lunch	Dinner	Snacks
Date ____/____				
Exercise Herbs Vitamins				

DAY 4	Breakfast	Lunch	Dinner	Snacks
Date ____/____				
Exercise Herbs Vitamins				

DAY 5	Breakfast	Lunch	Dinner	Snacks
Date ____/____				
Exercise Herbs Vitamins				

