Daily Food and Drink Tracker

Date:____________________

Time	Food/Description	Amount	Fat grams	Calories
		Totals		

Daily Physical Activity

Type of Activity	Minutes
Total	

Type of Activity	Minutes
Total	

I CAN Prevent Diabetes!
Individuals and Communities
Acting Now to Prevent Diabetes©

MY GAME PLAN

Name ____________________

Date ____________________
FROM TO

MY GAME PLAN THIS WEEK
FOR CUTTING FAT GRAMS:

FOR GETTING MORE PHYSICAL ACTIVITY

SAMPLE ENTRY

DAILY FOOD AND DRINK TRACKER		Date: Monday	
TIME	AMOUNT/NAME/DESCRIPTION	FAT GRAMS	CALORIES
8:00 AM	1/2 CUP OF OATMEAL	1	73
	1 CUP 2% MILK	5	121

Daily Food and Drink Tracker

Date:____________________

Time	*Food/Description*	*Amount*	*Fat grams*	*Calories*
		Totals		

Daily Physical Activity

Type of Activity	*Minutes*
Total	

Type of Activity	*Minutes*
Total	

Daily Food and Drink Tracker

Date:____________________

Time	*Food/Description*	*Amount*	*Fat grams*	*Calories*
		Totals		

Daily Physical Activity

Type of Activity	*Minutes*
Total	

Type of Activity	*Minutes*
Total	

Daily Food and Drink Tracker

Date:______________________

Time	Food/Description	Amount	Fat grams	Calories
		Totals		

Daily Physical Activity

Type of Activity	Minutes
Total	

Type of Activity	Minutes
Total	

Daily Food and Drink Tracker

Date:______________________

Time	Food/Description	Amount	Fat grams	Calories
		Totals		

Daily Physical Activity

Type of Activity	Minutes
Total	

Type of Activity	Minutes
Total	

Daily Food and Drink Tracker

Date:____________________

Time	*Food/Description*	*Amount*	*Fat grams*	*Calories*
		Totals		

Daily Physical Activity

Type of Activity	*Minutes*
Total	

Type of Activity	*Minutes*
Total	

Daily Food and Drink Tracker

Date:____________________

Time	*Food/Description*	*Amount*	*Fat grams*	*Calories*
		Totals		

Daily Physical Activity

Type of Activity	*Minutes*
Total	

Type of Activity	*Minutes*
Total	