

Name:
Email:
Contact Number:

Weight Loss for 7 days:
Kg
Please complete and email to

Day	½ Hr after waking	Food Group	Breakfast	11 AM	Lunch	3 PM	Dinner	Water				Other Food, Drinks & Snacks
1		1 Protein						1		2		
		3 Veggies						3		4		
		1 Fat						5		6		
		1 Carb						7		8		
2		1 Protein						1		2		
		3 Veggies						3		4		
		1 Fat						5		6		
		1 Carb						7		8		
3		1 Protein						1		2		
		3 Veggies						3		4		
		1 Fat						5		6		
		1 Carb						7		8		
4		1 Protein						1		2		
		3 Veggies						3		4		
		1 Fat						5		6		
		1 Carb						7		8		
5		1 Protein						1		2		
		3 Veggies						3		4		
		1 Fat						5		6		
		1 Carb						7		8		
6		1 Protein						1		2		
		3 Veggies						3		4		
		1 Fat						5		6		
		1 Carb						7		8		
7		1 Protein						1		2		
		3 Veggies						3		4		
		1 Fat						5		6		

		1 Carb						7		8		
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