

Daily Calorie Counter

Your Name: _____

Today's Date: _____

Daily Calorie Limit: _____

Breakfast		
Food and Drinks	Number of Calories	Calories Remaining

Lunch		
Food and Drinks	Number of Calories	Calories Remaining

Dinner		
Food and Drinks	Number of Calories	Calories Remaining

Snacks		
Food and Drinks	Number of Calories	Calories Remaining