Write ♥ if you did this activity, × if you didn't.	Times/ week	Total	Firstweek	Second week	Third week	Fourth week	Fifth week
		%			15 16 17 18 19 20 21 %		
Veight measurement			. kg	. kg	. kg	. kg	. kg
Physical activity action plan			<u>.</u>	·	-		
Count the total number of steps per day							
Walk Stepsor more							
Dietary habit action plan	+) iter	n:tob	e increased ⊖item : to	be decreased			
Count the number of healthy							
foods you ate today Green and deep yellow vegetables							
Light-colored vegetables							
Fish					1		
Soy and soy products .							
Mushrooms, seaweed, and konjac					1 Alexandre		
					6		
Large servings of grains such as rice, bread, and noodles							
Sweets/ pastries			1	1			
Sugary drinks							
Fatty meats							
Meat products							
Butter, margarine, dressing, and mayonnaise				1			
Eggs and liver				r			
Fried food							
Pickles							
Soup							
Consume one or fewer alcoholic drinksper day							
Record alcohol consumption (number of drinks per day)							

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