

## DAILY FOOD/FLUID INTAKE

Name: \_\_\_\_\_

Date: \_\_\_\_\_

### Breakfast

Food/Drinks Allowed	Food/Drinks Actually Consumed	Staff Signature

### AM Snack

Snacks Allowed	Snacks Actually Consumed	Staff Signature

### Lunch

Food/Drinks Allowed	Food/Drinks Actually Consumed	Staff Signature

### PM Snack

Snacks Allowed	Snacks Actually Consumed	Staff Signature

### Supper

Food/Drinks Allowed	Food/Drinks Actually Consumed	Staff Signature

### Evening Snack

Snacks Allowed	Snacks Actually Consumed	Staff Signature