






gooName: _____
 discretionary calories)

Date: _____ Daily calories: 1800 total (includes 195

(Use additional sheets as needed)

 Grain Group Make half your grains whole My goal: 6 ounces (3 ounces whole grains)	Type of food	Amount	Ounce equivalent	Whole grain?	Total calories	Discretionary calories used
 Vegetable Group Vary your veggies My goal: 2 1/2 cups	Type of food	Amount	Cup equivalent		Total calories	Discretionary calories used
 Fruit Group Focus on fruits My goal: 1 1/2 cups	Type of food	Amount	Cup equivalent		Total calories	Discretionary calories used
 Milk Group Get your calcium-rich foods My goal: 3 cups	Type of food	Amount	Cup equivalent		Total calories	Discretionary calories used
 Meat & Bean Group Go lean with protein My goal: 5 ounces	Type of food	Amount	Ounce equivalent		Total calories	Discretionary calories used
Other: List oils in this section. Your daily limit on oils is 5 teaspoons. Other "extras" include solid fats, sugars, and alcohol, which come out of your discretionary calorie allowance of 195 calories.	Type of food	Amount		Total calories	Discretionary calories used	
Daily calorie totals:						

