



5 DAY FOOD RECORD – TO BE FILLED OUT BY VOLUNTEER PARTICIPANT

AL	Day 1	Day 2	Day 3	Day 4	Day 5
0 am	1 Brownie slice Coffee with whole milk (3 teaspoons powdered milk y 1 teaspoon sugar)	5 tea biscuits Coffee with milk	5 tea biscuits Coffee with milk	3 tea biscuits Coffee with milk	1 panettone slice Coffee with milk
0 am	1 Brownie slice	1 Banana	1 banana	1 vanilla yogurt	-----
00 am	1 Oatmeal plate	Fried Arepa with mozzarella Cheese	Sandwich (bread Bimbo brand) with mozzarella	2 pancakes (homemade) with strawberry marmalade	2 empanadas (black bean and ground beef)
00 pm	2 teaspoons Nutella	2 teaspoons Nutella	6 pieces of chocolate milk	2 teaspoons Nutella	4 oreo cookies
0 pm	Pasta with ground beef and vegetables sauce	Chicken Stew with vegetables and steamed potatoes	Ground beef with vegetables + white rice + fried ripe plantains	Black beans	Roasted chicken + rice with vegetables + corn (rest.pollo tropical)

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5 DAY FOOD RECORD – TO BE FILLED OUT BY VOLUNTEER PARTICIPANT

0 pm	Chocolate wafer cookies/ Coffee with milk	5 tea biscuits with nutella Coffee with Milk	1 package soda cracker with Nutella Coffee with Milk	Coffee with milk	1 Panettone slice Coffee with Milk
0 pm	Mashed potatoes (with butter + cheese + powdered milk)	3 Oatmeal Pancakes	Pasta with cheese sauce (made with butter, mozzarella cheese and powdered milk)	Arepa stuffed with tuna can	Sandwich with mozzarella cheese
0 am	Choco krispis cereal with milk				1 Brownie slice with warm milk
TOTAL DAILY RE:	Around 8gr	Around 10gr	Around 8 Gr	Around 15 gr	Around 20gr.
TOTAL DAILY WATER INTAKE:	1 to 2 lts	1 to 2 lts	1 to 2 lts	1 to 2 lts	1 to 2 lts

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5 DAY FOOD RECORD – TO BE FILLED OUT BY VOLUNTEER PARTICIPANT

ENERGY LEVELS MOOD (Please provide as much details as possible ie very tired all day, needed a nap at noon, etc. very energetic, happy calm, etc)	Anxiety most of the day Sleep patterns: 10:00 pm – 300 am 4:30 am – 6:30 am	Anxiety most of the day Sleep patterns: 10:00 pm – 300 am 4:30 am – 6:30 am	Anxiety most of the day Sleep patterns: 10:00 pm – 300 am 4:30 am – 6:30 am	Anxiety most of the day Sleep patterns: 10:00 pm – 300 am 4:30 am – 6:30 am	Anxiety most of the day Sleep patterns: 10:00 pm – 300 am 4:30 am – 6:30 am

NAME: Cristina Moros

DATE: December 3rd

Please fill in the above 5-day food record. Please include with each meal all drinks (ie coffee with 2 cream), and condiments. For packaged foods, please include brand names. Please also include if the meal was eaten at home or at a restaurant.

For your energy and moods levels, please be descriptive as possible including times of energy slumps, etc. Please also make a note if you woke up on that day

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