

Food Log

Date: _____

When & Where?	What were you doing? Who were you with?	What did you eat and drink?	Did you Binge? (Yes/No)	Did you vomit or use laxatives? (V or L)	Triggers – What caused you to binge? Thoughts – What were you thinking? Feelings – What were your feeling(s)?

Exercise Log: What/When/How long