

Group Lifestyle Balance™ Leader's Log

Name _____ Phone _____ E-mail _____

Goals: Calories: _____ Fat grams _____ 7% weight loss _____

Session	Date	Weight (pounds)	Self-Monitoring		Comments
			Total Activity Min/Week	Total Steps/ Week	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					