

"I Tried It"

Chart

Name: _____ Age: _____

*List all the fruits and vegetables you eat each day.

Day 1

- 1.
- 2.
- 3.
- 4.
- 5.

Day 2

- 1.
- 2.
- 3.
- 4.
- 5.

Day 3

- 1.
- 2.
- 3.
- 4.
- 5.

Day 4

- 1.
- 2.
- 3.
- 4.
- 5.

Day 5

- 1.
- 2.
- 3.
- 4.
- 5.



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