FOOD STORAGE LIST

| 5 d O . d | Full Stock | | 0 10 | a. v | |
|---------------|------------|-----|------|---------------|------------|
| Food Category | Туре | Qty | Size | Current Stock | Qty Needed |
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TELEPHONE NUMBERS

| Name | Telephone # | | | | |
|---------------------------------------|----------------|--|--|--|--|
| Emergency Services | | | | | |
| Police, Fire, Ambulance | 911 | | | | |
| Poison Control Center | 1-800-222-1222 | | | | |
| Emergency Management (FEMA) | 1-800-621-FEMA | | | | |
| Centers for Disease Control (CDC) | 1-800-311-3435 | | | | |
| Federal Bureau of Investigation (FBI) | 1-800-CALL-FBI | | | | |
| Local Chapter of American Red Cross | | | | | |
| Medica | //School | | | | |
| Family Doctor | | | | | |
| Child Doctor | | | | | |
| Dentist | | | | | |
| School | | | | | |
| I I tili | ities | | | | |
| Gas Company | | | | | |
| Electric Company | | | | | |
| Sewage Service Provider | | | | | |
| Water Service Provider | | | | | |
| | | | | | |
| Family/ | Friends | | | | |
| Neighbor | | | | | |
| Babysitter | | | | | |
| Local Emergency Contact | | | | | |
| Out-of-town Emergency Contact | | | | | |
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| Insurance Companies | | | | | |
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| Other | | | | | |
| Local Animal Control | | | | | |
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IMPORTANT PAPERS

| ☐ Addresses and phone numbers of points of contact (family, friends, insurer, doctor, etc.) |
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| ☐ Driver's licenses |
| ☐ Social Security cards |
| ☐ Birth/Death certificates |
| ☐ Adoption papers |
| ☐ Insurance cards and policies (medical, dental, vision, auto, home, life) |
| ☐ Credit cards (front and back) |
| □ Passports |
| ☐ Recent photos of family members (suitable for missing person's posters) |
| ☐ Military discharge papers (e.g., DD214) |
| ☐ Diplomas, certificates |
| □ Property deeds |
| ☐ Description of all vehicles (e.g., make, model, photo, VIN, and license number) |
| ☐ Automobile titles |
| ☐ Firearm serial numbers and photos |
| ☐ Weapon permits |
| □ Pay stub |
| ☐ Marriage license |
| ☐ Home inventory video or photos |
| ☐ Bank/Investment account information |
| ☐ Tax records |
| ☐ Computer account logins and passwords |
| ☐ Medical information (allergies, medicines, medical history) |
| ☐ Resume (for job hunting) |
| ☐ First aid information (see the Captain's Medical Guide ²⁴⁵) |
| ☐ Survival reference information (collection of e-books, online tips, how-to manuals) |
| ☐ GPS locations and driving directions of house, rally points, local medical emergency services, and |
| other key places—see www.maps.google.com. For GPS coordinates, right click and select "What's here?" |

| ☐ Last Will and Testament |
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| ☐ Professional licenses |
| ☐ Bible and other e-books |
| ☐ Relaxing music |
| ☐ Foreign language dictionaries (e.g., Spanish) |
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HOME ASSESSMENT

| Threat | Likelihood (1-10) | Protection (1-10) | Steps to Improve |
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HOME HAZARDS CHECKLISTS

| Outdoor Hazards |
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| Indoor Hazards |
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LIST OF MEDICATIONS AND ALLERGIES

| Medications | | | | |
|---------------|------------|----------|--|--|
| Family Member | Medication | Dosage | | |
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| | Allergies | | | |
| Family Member | Allergy | Reaction | | |
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LEAVE BEHIND NOTE

Attention!

| Accelleron. |
|--|
| have (abandoned my vehicle) / (evacuated my home) due to an emergency situation. |
| My Name: |
| Telephone: |
| Address: |
| My travel plans and emergency contact information are given below. I am requesting that emerger personnel confirm my safe arrival before discarding this note. |
| My Travel Plans: |
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| Emergency Contact Information |
| Name: |
| Phone Numbers: |
| Address: |

PERSONALIZED DP PLAN

| | | Plan | | |
|---------|-------|-------|----------------|--|
| Dangers | Goals | Needs | Implementation | |
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