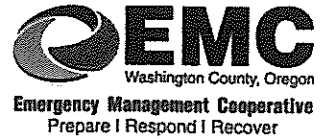


TAKE 5



PREPAREDNESS CALENDAR



Family Disaster Supplies and Preparedness Activities

- This calendar is intended as a tool to help you prepare for disasters before they happen.
- After you purchase an item or complete an activity, check the box next to it.

MONTH 1	Purchase: <input type="checkbox"/> Water – At least 3 gallons per person, per day plus pets <input type="checkbox"/> Hand-operated can opener <input type="checkbox"/> Instant drinks (coffee, tea, powdered milk, powdered fruit drinks) <input type="checkbox"/> 2 flashlights with extra batteries	Activities: <input type="checkbox"/> Make your family disaster preparedness plan* <input type="checkbox"/> Inventory disaster supplies already on hand, especially camping gear <input type="checkbox"/> If you fill your own water containers, mark them with the date filled <input type="checkbox"/> Date water/food containers if they are not dated <input type="checkbox"/> Conduct a home hazard hunt*
MONTH 2	Purchase: <input type="checkbox"/> Canned meat, stew, or pasta meal - 5 per person <input type="checkbox"/> Feminine hygiene supplies <input type="checkbox"/> CD/DVD or videotape <input type="checkbox"/> Family-size first aid kit	Activities: <input type="checkbox"/> Change battery and test smoke alarm (purchase and install an alarm if you don't have one) <input type="checkbox"/> Film your home, including contents, for insurance purposes. Store the CD/DVD with friends or family who live out of town.
MONTH 3	Purchase: <input type="checkbox"/> Canned fruit - 3 cans per person <input type="checkbox"/> Any foods for special dietary needs (enough for 3 days) <input type="checkbox"/> 2 rolls of toilet paper per person <input type="checkbox"/> Crescent wrench(es) (or utility shutoff tools)	Activities: <input type="checkbox"/> Conduct a home fire drill <input type="checkbox"/> Check with your child's day care or school to find out about their disaster plans <input type="checkbox"/> Locate gas meter and water shutoff points and attach/store wrench or shutoff tool near them <input type="checkbox"/> Establish an out-of-state contact to call in case of emergency
<p><i>Your supplies may be stored together in one large container, such as a garbage can on wheels, or several small ones. Food items could be kept on a specific shelf in the pantry.</i></p>		
MONTH 4	Purchase: <input type="checkbox"/> Canned vegetables - 4 per person <input type="checkbox"/> Extra baby bottles, formula, and diapers, if needed <input type="checkbox"/> Extra pet supplies: food, collar, leash <input type="checkbox"/> Large storage container(s) for preparedness supplies	Activities: <input type="checkbox"/> Place a sturdy pair of shoes and a flashlight under your bed, so that they will be handy during an emergency <input type="checkbox"/> Place a supply of necessary medicine(s) in storage container and date the medicine(s), if not already indicated on its label <input type="checkbox"/> Start putting supplies in storage container(s) and include blankets or sleeping bags for each family member
MONTH 5	Purchase: <input type="checkbox"/> Canned, ready-to-eat soup - 2 per person <input type="checkbox"/> Liquid dish soap <input type="checkbox"/> Plain liquid bleach <input type="checkbox"/> Portable am/fm radio (extra batteries) <input type="checkbox"/> Anti-bacterial liquid hand soap or waterless hand sanitizer <input type="checkbox"/> Disposable hand wipes	Activities: <input type="checkbox"/> Make photocopies of important papers and put in a fire-proof safe <input type="checkbox"/> Talk with neighbors to find out who may have skills or training that would be beneficial after a disaster (i.e., first aid, child care, amateur radio, tree removal, small engine repair, heavy equipment operations, wilderness survival, light rescue, carpentry)

**Contact your local Emergency Management Office for more information on this activity*

Examples of Food Items:

- Select based on your family's preferences
- Pick low-salt, water-packed varieties when possible

Canned Meat:	tuna, chicken, raviolis, chili, stew, Spam™, corned beef, etc.
Vegetables:	green beans, corn, peas, beets, baked beans, carrots, etc.
Fruit:	pears, applesauce, mandarin oranges, pineapple, etc.

MONTH 6	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Quick-energy snacks (granola bars, raisins, peanut butter) <input type="checkbox"/> 6 rolls of paper towels <input type="checkbox"/> 3 boxes of facial tissue <input type="checkbox"/> Sunscreen <input type="checkbox"/> Anti-diarrhea medicine <input type="checkbox"/> Latex gloves- if no allergies to latex (Buy 6 pairs and put in first aid kit) 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Check to see if your stored water has expired and needs to be replaced. (Replace every 6 months if you filled your own containers. Store-bought water will have an expiration date on the container.) <input type="checkbox"/> Put an extra pair of eyeglasses in the supply container <input type="checkbox"/> Store a roll of quarters with the emergency supplies and locate the pay phone nearest to your home <input type="checkbox"/> Find out about your workplace disaster plans
MONTH 7	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Whistle <input type="checkbox"/> A-B-C fire extinguisher <input type="checkbox"/> 1 large can of juice per person <input type="checkbox"/> Adult and children vitamins <input type="checkbox"/> A pair of pliers and/or vise grips 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Take a first aid/CPR class <input type="checkbox"/> Identify neighbors who might need help in an emergency (limited mobility, health problems, children home alone, etc.) <input type="checkbox"/> Show family members where, when and how to shut off the utilities
MONTH 8	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Box of crackers or graham crackers <input type="checkbox"/> Dry cereal <input type="checkbox"/> "Child-proof" latches or other fasteners for cabinet doors and drawers <input type="checkbox"/> 1 box of large, heavy-duty garbage bags <input type="checkbox"/> Camping or utility knife 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Secure shelves, cabinets, and drawers with "child-proof" latches to prevent them from falling and/or opening during earthquakes <input type="checkbox"/> Meet with neighbors to inventory expensive equipment that could be shared in the event of an emergency, such as chain saws, chippers/shredders, utility trailers, snow blowers, and 4-wheel drive vehicles
MONTH 9	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Extra batteries for flashlights, radio, and hearing aids (if needed) <input type="checkbox"/> Heavy rope <input type="checkbox"/> Duct tape <input type="checkbox"/> Crowbar 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Make a small preparedness kit for your car. Include food, water, blanket, small first aid kit, a list of important phone numbers, and quarters for pay phones and vending machines. <input type="checkbox"/> Secure water heater to wall studs (if not already done) <input type="checkbox"/> Identify locations of pay phones in your neighborhood
MONTH 10	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Hammer and assorted nails <input type="checkbox"/> Screwdrivers and assorted wood screws <input type="checkbox"/> Heavy duty plastic tarps or plastic sheeting <input type="checkbox"/> Extra toothbrush per person and toothpaste 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Make arrangements to have someone help your children if you're at work when an emergency occurs <input type="checkbox"/> Conduct an earthquake drill at home <input type="checkbox"/> Replace necessary medicines as required by expiration dates <input type="checkbox"/> Encourage friends and family members to prepare for emergencies
MONTH 11	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Package of paper plates <input type="checkbox"/> Package of napkins <input type="checkbox"/> Package of eating utensils <input type="checkbox"/> Package of paper cups <input type="checkbox"/> Masking tape <input type="checkbox"/> Kitchen-size garbage bags (1 box) 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Make arrangements to have someone take care of your pets if you are at work when an emergency occurs <input type="checkbox"/> Exchange work, home, and emergency contact phone numbers with neighbors for use during an emergency <input type="checkbox"/> Start a Neighborhood Watch Program, if none exists
MONTH 12	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Heavy work gloves <input type="checkbox"/> Box of disposable dust masks <input type="checkbox"/> Safety goggles <input type="checkbox"/> Antiseptic <input type="checkbox"/> Sewing kit 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Check to see if your stored water has expired and needs to be replaced. (Replace every 6 months if you filled your own containers. Store-bought water will have an expiration date on the container.) <input type="checkbox"/> Check the dates on stored food and replace as needed