

Emergency Family 72 Hour Kit

Need Have In Kit

FOOD

3 day supply (requiring no heat or refrigeration)
See instructions for 72 hour emergency food kit

WATER

____ $\frac{1}{2}$ gallons per person per day

SHELTER

tarp, ground cloth, or tent

sleeping bags or blankets or emergency blanket

clothing-one complete change for each person

rain poncho (or plastic garage bag)

sweatshirt or jacket

hat or visor

LIGHTING

flashlights (with extra batteries

signal flares

lantern (battery operated)

EQUIPMENT

AM radio and batteries - KOGO/AM 600

pocket knife

plastic utensils, paper cups, plates

can opener

ziploc bags

50 ft nylon cord or rope

tools - shovel, ax, small saw, crowbar, hammer

duct tape

clothes pins



FIRST AID SUPPLIES

Need Have In Kit

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | personal medications - eyeglasses, hearing aids |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | assorted adhesive bandages |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | gauze pads and tape |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | tweezers |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | scissors |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | antibacterial soap |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | antiseptic wipes |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | neosporin |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | benedryl |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | aspirin, Tylenol - pain reliever, fever reducer |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | elastic bandages |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | first aid manual |

SANITATION

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | garbage bags and ties |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | toilet paper, moist towelettes (baby wipes) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | antibacterial soap |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | personal hygiene - toothbrush, toothpaste, floss |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | feminine needs |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | comb, chap-stick, lotion, sunscreen |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | washcloths, towel, paper towels |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | disinfectant |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | household bleach |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | toilet arrangement - plastic bucket with lid, |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | plastic liners and ties |

STRESS REDUCERS

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | children - coloring books, crayons, puzzles, |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | books, toys, games, candy |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | adults - reading material, games, notebook, pen, |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | harmonica, scriptures |

Need Have In Kit

- | | | |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|

GRAB AND GO DOCUMENT BOX

see sheet listing specifics

- | | | |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|

WALLET/PURSE

cash - small bills

sunglasses

keys (include a spare set if possible)

credit cards, gas and phone cards

wrist watch

maps of your area

cell phone and spare battery

- | | | |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|

PET SUPPLIES

food

water

dish

treats

leash

SPECIAL NEEDS

any items for infant, elderly or disabled

family members