



PREPAREDNESS CALENDAR

Disaster supplies and preparedness activities over 12 months



MONTH 1	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 gallon of water* <input type="checkbox"/> Hand-operated can opener and bottle opener <input type="checkbox"/> Liquid dish soap <input type="checkbox"/> Plain liquid bleach <input type="checkbox"/> Plastic wrap (like Saran) <input type="checkbox"/> Aluminum foil <input type="checkbox"/> Heavy-duty work gloves <input type="checkbox"/> 1 container for your preparedness supplies 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Pet food and water <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Find out about disasters that can happen in your area. Identify safe places to go in case of fire, earthquake other local disaster. <input type="checkbox"/> Inventory disaster supplies already on hand, especially camping gear. Place the items in your kit and cross off this list <input type="checkbox"/> Conduct a home hazard hunt <link to page>
MONTH 2	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 can juice* <input type="checkbox"/> Cereal bars, dry cereal, instant oatmeal* <input type="checkbox"/> 2 flashlights with batteries <input type="checkbox"/> Feminine hygiene supplies <input type="checkbox"/> Antibacterial liquid soap <input type="checkbox"/> Disposable hand wipes <input type="checkbox"/> Duct tape 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Extra baby supplies (formula, bottles, diapers, wipes) <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Check with your child's daycare or school to find out about their disaster plans <input type="checkbox"/> Establish an out-of-area contact who can coordinate information among family members during an emergency <input type="checkbox"/> Locate the gas meter and water shutoff points. Attach/store wrench or shutoff tools nearby
MONTH 3	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 can meat or stew* <input type="checkbox"/> 2 rolls toilet paper* <input type="checkbox"/> 6 rolls paper towels <input type="checkbox"/> 3 boxes facial tissue <input type="checkbox"/> Sunscreen <input type="checkbox"/> Antidiarrheal medicine <input type="checkbox"/> 1 container for your preparedness supplies 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Pet supplies (food, water, leash, collar, carrier, pet first aid kit, litter, photo) <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Find out about your workplace disaster plans. <input type="checkbox"/> Make your family preparedness plan. Visit <link to something here> for suggestions. <input type="checkbox"/> Place a sturdy pair of shoes and a flashlight under each family member's bed so that they will be handy during an emergency.

* one for each family member



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MONTH 4	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 can vegetables* <input type="checkbox"/> Family-sized first aid kit <p>Be sure to write the purchase date on all water and food containers that do not already have an expiration date!</p>	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Denture care supplies <input type="checkbox"/> Contact lens supplies <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Identify neighbors who may need help in an emergency (elderly, those with limited mobility or health problems, children who might be alone). <input type="checkbox"/> Make photocopies of important papers and information, place in a waterproof bag and put with your supplies. <input type="checkbox"/> Conduct a home fire drill during the day.
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MONTH 5	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 can fruit* <input type="checkbox"/> Small-sized versions of any needed condiments <input type="checkbox"/> Matches in waterproof container or lighter <input type="checkbox"/> Masking tape <input type="checkbox"/> 1 container for your preparedness supplies 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Small baggies or jars of most-used spices, including salt, pepper and sugar. <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Take a CPR/first aid class. <input type="checkbox"/> Test your family communication plan. <input type="checkbox"/> Identify a storage location for your supplies. If storing outside, be sure your storage containers are weather and animal-proof.
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MONTH 6	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 can ready to eat or instant soup* <input type="checkbox"/> Safety pins <input type="checkbox"/> Pliers <input type="checkbox"/> Crescent wrenches (or utility shutoff tools) <input type="checkbox"/> Pain reliever <input type="checkbox"/> Camping or utility knife <input type="checkbox"/> Sewing kit <input type="checkbox"/> Heavy-duty tarps or plastic sheeting 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Add a change of clothing and jacket for each family member to your kit <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Place a supply of medications/prescriptions with your supplies. Date any medication that is not dated. <input type="checkbox"/> Change battery in smoke detector. <input type="checkbox"/> Check to see if your water is expired (replace every 6 months if you filled your own containers).
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MONTH 7	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 box energy bars or snacks* <input type="checkbox"/> Extra batteries for flashlights, radio and hearing aids <input type="checkbox"/> Assorted waterproof zipper bags <input type="checkbox"/> Kitchen-sized garbage bags or plastic grocery sacks <input type="checkbox"/> Package of eating utensils <input type="checkbox"/> Package of paper cups <input type="checkbox"/> Additional storage container for your preparedness supplies (if needed) 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> An activity box for kids (toys, games, puzzles) <p>Activities:</p> <ul style="list-style-type: none"> <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). <input type="checkbox"/> Test your evacuation plan. Bring your pets and your emergency kit during the test. Update your plan after the test.
MONTH 8	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Box of crackers or graham crackers* <input type="checkbox"/> ABC fire extinguisher <input type="checkbox"/> Surgical-type gloves (to be put with the first aid kit) <input type="checkbox"/> Package of paper plates <input type="checkbox"/> Package of napkins 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Blankets or a sleeping bag for each family member <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Exchange work, home and emergency contact phone numbers with neighbors. Encourage them to develop their own emergency plans. <input type="checkbox"/> Test your shelter in place plan in your home. Consider going without power and water, and using items from your kit for a weekend. Be sure to include your pets in your test! Update your plan after the test.
MONTH 9	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Coffee, cocoa or tea <input type="checkbox"/> Canned or powdered milk* <input type="checkbox"/> Portable AM/FM radio with batteries or hand crank <input type="checkbox"/> Box of large garbage bags <input type="checkbox"/> Thermometer <input type="checkbox"/> Antacid tablets 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> An extra pair of eyeglasses <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meet with neighbors to inventory equipment that could be shared during an emergency (chain saws, generators, utility trailers, ATVs). <input type="checkbox"/> Secure water heaters, shelves, cabinets and drawers to keep them from falling and/or opening during an earthquake. Use museum putty to secure moveable items.

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MONTH 10	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Dried fruit and nuts <input type="checkbox"/> Special dietary items <input type="checkbox"/> Heavy rope <input type="checkbox"/> Crowbar <input type="checkbox"/> Hammer and assorted nails <input type="checkbox"/> Screw drivers and assorted screws 	<p>Add to your kit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Additional items needed for your family <p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Make a small preparedness kit for each vehicle. Include food, water, blanket, small first aid kit, cell phone charger, list of important phone numbers. <input type="checkbox"/> Conduct an earthquake drill. Rearrange or secure additional items if needed.
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MONTH 11	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Comfort foods <input type="checkbox"/> Plastic bucket with lid for toileting needs <input type="checkbox"/> Extra toothbrush and toothpaste* 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Start a Neighborhood Watch program. <input type="checkbox"/> Make arrangements to have someone help your children and/or animals if you're at work when an emergency occurs.
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MONTH 12	<p>Purchase:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Box of disposable dust masks <input type="checkbox"/> Safety goggles <input type="checkbox"/> Antiseptic wash/spray <input type="checkbox"/> Additional storage containers for your kit (if needed) <input type="checkbox"/> Any other needed supplies you identified during the past 11 months 	<p>Activities:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Check the expiration dates on stored water, food and medications (including any in your first aid kit). Rotate or replace supplies as needed. <input type="checkbox"/> Make a 12-month plan for the coming year to test and update your plans, and to rotate items in your emergency kit as needed.
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Congratulations on your preparedness efforts! Be sure to test and maintain your plans and emergency supplies. Consider expanding your kit over the next 12-24 months to include additional items your family needs in order to be comfortable.

* one for each family member