

## Build an "Instant Aid Box"

Pack an Instant Aid Box containing things that might be needed immediately upon arrival at your new home. Package each group of items in a large paper bag or box and clearly label. Take your Instant Aid Box with you. Also pack a separate bag/box of items that you will need to take with you on your trip to your new home.

Items for your Instant Aid Box:

### Kitchen

- |  |  |
|--|--|
| <input type="checkbox"/> Sponge        | <input type="checkbox"/> Paper Plates, Cups, Napkins |
| <input type="checkbox"/> Paper Towels  | <input type="checkbox"/> Plastic Cutlery             |
| <input type="checkbox"/> Dish Towels   | <input type="checkbox"/> Plastic Pitcher             |
| <input type="checkbox"/> Dishcloth     | <input type="checkbox"/> Small Saucepan              |
| <input type="checkbox"/> Scouring Pads | <input type="checkbox"/> Serving Spoons              |
| <input type="checkbox"/> Detergent     | <input type="checkbox"/> Aluminum Foil               |

### Snacks

- |  |  |
|--|--|
| <input type="checkbox"/> Easy-open Cans of Pudding | <input type="checkbox"/> Coloring Books    |
| <input type="checkbox"/> Dry Soup Mix              | <input type="checkbox"/> A Favorite Toy    |
| <input type="checkbox"/> Sandwich Spreads          | <input type="checkbox"/> Reading Materials |
| <input type="checkbox"/> Instant Drinks            | <input type="checkbox"/> Puzzles           |
|  | <input type="checkbox"/> Portable Games    |

### Bath

- |  |   |
|--|---|
| <input type="checkbox"/> Light Bulbs               | <input type="checkbox"/> Towels and Face Cloths |
| <input type="checkbox"/> Hammer                    | <input type="checkbox"/> Toilet Tissue          |
| <input type="checkbox"/> Screw Driver              | <input type="checkbox"/> Facial Tissue          |
| <input type="checkbox"/> Pliers                    | <input type="checkbox"/> Soap                   |
| <input type="checkbox"/> Assorted Nails and Screws | <input type="checkbox"/> Hand Lotion            |
| <input type="checkbox"/> Shelf Paper               | <input type="checkbox"/> Non-aerosol Deodorant  |
| <input type="checkbox"/> Trash Bags and Ties       | <input type="checkbox"/> Toothbrushes           |
| <input type="checkbox"/> Telephone                 | <input type="checkbox"/> Toothpaste             |