READY & RESOURCEFUL / FREE HOUSEHOLD PLANNING SHEET

NINE-MEAL EMERGENCY PLAN

Household / people: _____ Date: _____

Choose familiar food and suitable portions. Check labels, allergies, opening tools, safe water needs and storage after opening. No-cook meals remove a power dependency.

DAY 1

Breakfast _____

Lunch _____

Dinner _____

DAY 2

Breakfast _____

Lunch _____

Dinner _____

DAY 3

Breakfast _____

Lunch _____

Dinner _____

Snacks / utensils / opener / special feeding needs: _____