

FIRST NIGHT IN MY NEW APARTMENT

CHECKLIST



OVERNIGHT ESSENTIALS

- | | |
|--|--|
| <input type="checkbox"/> Bed Sheets | <input type="checkbox"/> Flashlight |
| <input type="checkbox"/> Pillows | <input type="checkbox"/> Pills/Medicine |
| <input type="checkbox"/> Pajamas | <input type="checkbox"/> Snacks |
| <input type="checkbox"/> Clean Clothes | <input type="checkbox"/> Beverages |
| <input type="checkbox"/> Chargers | <input type="checkbox"/> Tool Kit |
| <input type="checkbox"/> Soap | <input type="checkbox"/> Scissors |
| <input type="checkbox"/> Shampoo | <input type="checkbox"/> Pet Food & Dishes |
| <input type="checkbox"/> Toothbrush/Toothpaste | <input type="checkbox"/> Contact Numbers |
| <input type="checkbox"/> Shower Curtain | <input type="checkbox"/> Wallet & Credit Cards |
| <input type="checkbox"/> Towels | <input type="checkbox"/> Keys |
| <input type="checkbox"/> Toilet Paper | |
| <input type="checkbox"/> Paper Towels/Tissues | |
| <input type="checkbox"/> Basic Cleaning Supplies | |
| <input type="checkbox"/> Garbage Bags | |
| <input type="checkbox"/> Plates/Cups/Utensils | |

OTHER

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