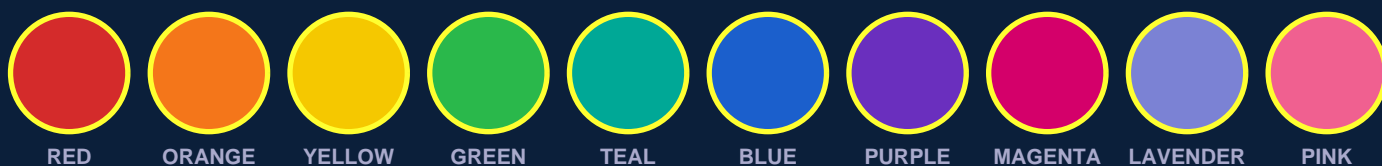


# Color-Coded Moving Label Kit

Complete system for homes up to 7 bedrooms · 5 bathrooms · Indoor & outdoor



## WHAT'S IN THIS KIT

- Mover's Legend — hand one to each mover on moving day
- Room Door Labels — tape to doorframes at your new home (28 rooms)
- Box Label Sheets — 4 cut-and-tape labels per room
- Inventory Sheets — track contents of every box per room

## HOW IT WORKS

- 1 **Print this kit** — Standard 8.5x11 paper, color printing recommended.
- 2 **Buy dot stickers** — Any 10-color pack from Amazon or a dollar store (~\$6–10).
- 3 **Label doorframes** — Tape each room's label to the doorframe at your NEW home.
- 4 **Sticker your boxes** — Place matching color dot stickers on every box as you pack.
- 5 **Hand legend to movers** — Give each mover the legend on moving day. They'll know exactly where

# MOVER'S LEGEND

Print and hand one copy to each mover on moving day

**HOW IT WORKS:** Match the dot sticker on the box to the matching color border on the room doorframe. Simple.

## BEDROOMS



- **Master Bedroom** · Primary Suite Name/Note: \_\_\_\_\_
- **Bedroom 2** Name/Note: \_\_\_\_\_
- **Bedroom 3** Name/Note: \_\_\_\_\_
- **Bedroom 4** Name/Note: \_\_\_\_\_
- **Bedroom 5** Name/Note: \_\_\_\_\_
- **Bedroom 6** Name/Note: \_\_\_\_\_
- **Bedroom 7** Name/Note: \_\_\_\_\_
- **Nursery** · Baby's Room Name/Note: \_\_\_\_\_

## BATHROOMS



- **Bathroom 1** · Master Bath Name/Note: \_\_\_\_\_
- **Bathroom 2** Name/Note: \_\_\_\_\_
- **Bathroom 3** Name/Note: \_\_\_\_\_
- **Bathroom 4** Name/Note: \_\_\_\_\_
- **Bathroom 5** Name/Note: \_\_\_\_\_

## COMMONS



- **Kitchen** Name/Note: \_\_\_\_\_
- **Living Room** Name/Note: \_\_\_\_\_
- **Dining Room** Name/Note: \_\_\_\_\_
- **Breakfast Nook** · Eat-In Area Name/Note: \_\_\_\_\_
- **Laundry Room** Name/Note: \_\_\_\_\_
- **Home Office** Name/Note: \_\_\_\_\_
- **Bonus Room** · Playroom / Media Name/Note: \_\_\_\_\_

## GARAGE



- **1 Main Garage** Name/Note: \_\_\_\_\_
- **2 Garage 2** Name/Note: \_\_\_\_\_

## OUTDOORS



- **Pool Area** Name/Note: \_\_\_\_\_
- **2 Pool Room** · Pool House Name/Note: \_\_\_\_\_
- **3 Backyard** · Patio / Yard Items Name/Note: \_\_\_\_\_
- **4 Driveway** · Large / Heavy Outdoor Name/Note: \_\_\_\_\_

## STORAGE



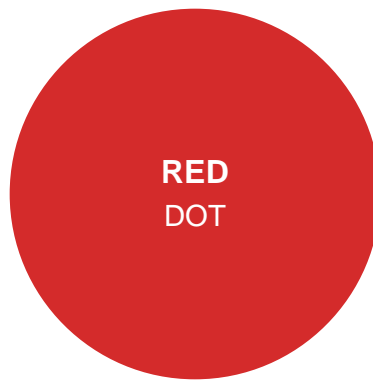
- **S Storage** · Do Not Unpack Name/Note: \_\_\_\_\_
- **A Attic** Name/Note: \_\_\_\_\_

**MOVER NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Tip: Colored dot stickers from any dollar store or Amazon · [movingcosts.com/moving-supplies/](https://movingcosts.com/moving-supplies/)

# MASTER BEDROOM

Primary Suite



Place red dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BEDROOM 2



Place red dot stickers #2 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BEDROOM 3



Place red dot stickers #3 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BEDROOM 4



Place red dot stickers #4 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BEDROOM 5



Place red dot stickers #5 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BEDROOM 6



Place red dot stickers #6 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BEDROOM 7



Place red dot stickers #7 on all boxes for this room

**NAME / DESCRIPTION:**

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**DESCRIPTION:**

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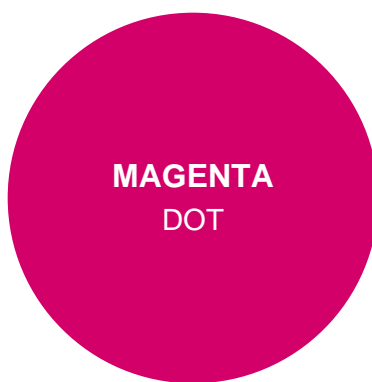
**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# NURSERY

Baby's Room



Place magenta dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BATHROOM 1

Master Bath



Place teal dot stickers #1 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BATHROOM 2



Place teal dot stickers #2 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BATHROOM 3



Place teal dot stickers #3 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BATHROOM 4



Place teal dot stickers #4 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BATHROOM 5



Place teal dot stickers #5 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

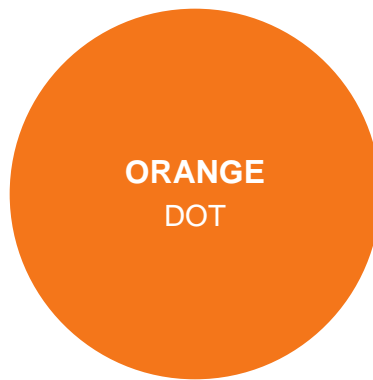
---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# KITCHEN



Place orange dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

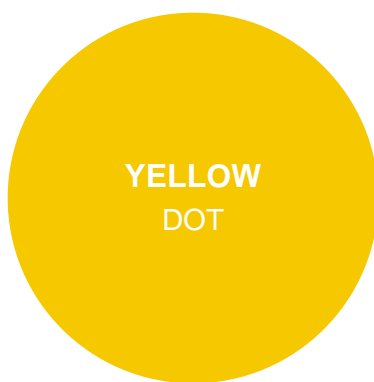
---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# LIVING ROOM



Place yellow dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

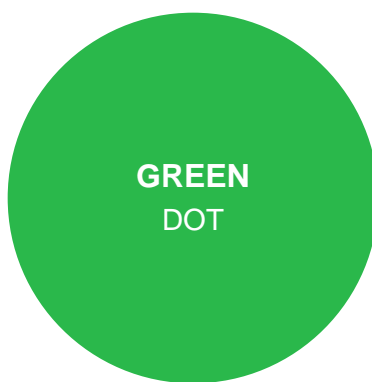
---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# DINING ROOM



Place green dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BREAKFAST NOOK

Eat-In Area



Place green dot stickers #2 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

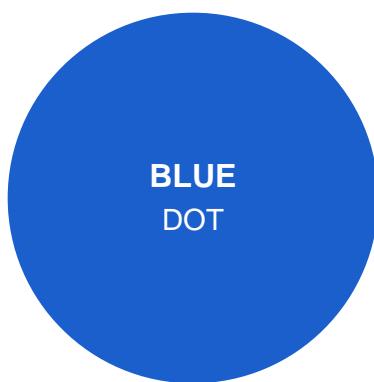
---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# LAUNDRY ROOM



Place blue dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

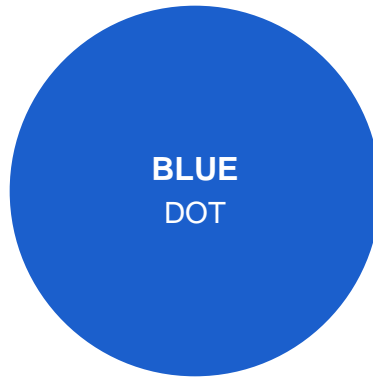
---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# HOME OFFICE



Place blue dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

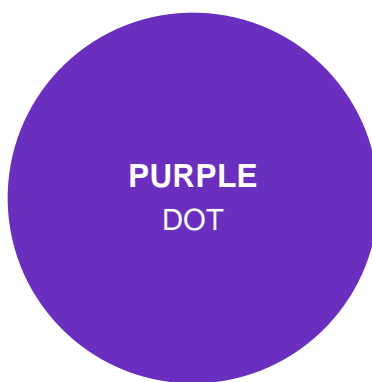
**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BONUS ROOM

Playroom / Media



Place purple dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

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**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# MAIN GARAGE



Place lavender dot stickers #1 on all boxes for this room

**NAME / DESCRIPTION:**

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**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# GARAGE 2



Place lavender dot stickers #2 on all boxes for this room

**NAME / DESCRIPTION:**

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**DESCRIPTION:**

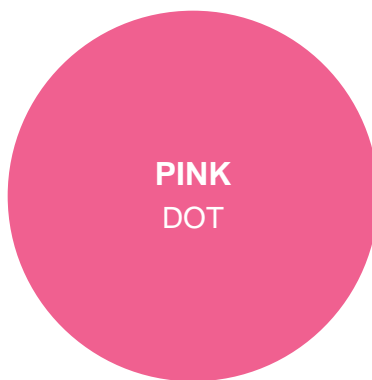
---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# POOL AREA



Place pink dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# POOL ROOM

Pool House



Place pink dot stickers #2 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# BACKYARD

Patio / Yard Items



Place pink dot stickers #3 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

---

**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# DRIVEWAY

Large / Heavy Outdoor



Place pink dot stickers #4 on all boxes for this room

**NAME / DESCRIPTION:**

---

**DESCRIPTION:**

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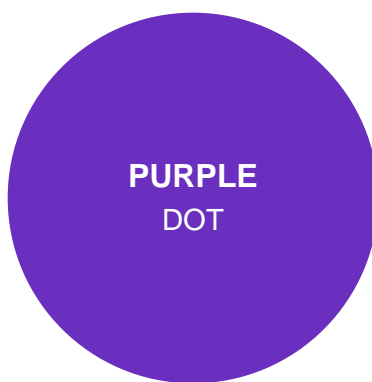
**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# STORAGE

Do Not Unpack



Place purple dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

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**DESCRIPTION:**

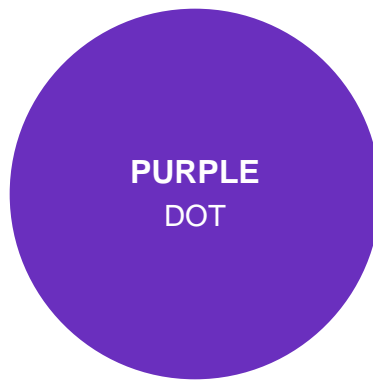
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**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

# ATTIC



Place purple dot stickers on all boxes for this room

**NAME / DESCRIPTION:**

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**DESCRIPTION:**

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**NOTES:**

---

e.g. "Sarah's Room" · "Guest Suite" · "In-Law Suite" · "Home Gym"

 **Master Bedroom**  
RED DOT

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**Name/Description:**

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**Contents:**

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Master Bedroom**  
RED DOT

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**Name/Description:**

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**Contents:**

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Master Bedroom**  
RED DOT

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**Name/Description:**

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**Contents:**

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Master Bedroom**  
RED DOT

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**Name/Description:**

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**Contents:**

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Bedroom 2**  
RED #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Bedroom 2**  
RED #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Bedroom 2**  
RED #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Bedroom 2**  
RED #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Bedroom 3**  
RED #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Bedroom 3**  
RED #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Bedroom 3**  
RED #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Bedroom 3**  
RED #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Bedroom 4**  
RED #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Bedroom 4**  
RED #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Bedroom 4**  
RED #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Bedroom 4**  
RED #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**5 Bedroom 5**  
RED #5 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**5 Bedroom 5**  
RED #5 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**5 Bedroom 5**  
RED #5 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**5 Bedroom 5**  
RED #5 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**6 Bedroom 6**  
RED #6 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**6 Bedroom 6**  
RED #6 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**6 Bedroom 6**  
RED #6 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**6 Bedroom 6**  
RED #6 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**7 Bedroom 7**  
RED #7 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**7 Bedroom 7**  
RED #7 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**7 Bedroom 7**  
RED #7 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**7 Bedroom 7**  
RED #7 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Nursery**  
MAGENTA DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Nursery**  
MAGENTA DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Nursery**  
MAGENTA DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Nursery**  
MAGENTA DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**1 Bathroom 1**  
TEAL #1 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**1 Bathroom 1**  
TEAL #1 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**1 Bathroom 1**  
TEAL #1 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**1 Bathroom 1**  
TEAL #1 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Bathroom 2**  
TEAL #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Bathroom 2**  
TEAL #2 DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Bathroom 2**  
TEAL #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Bathroom 2**  
TEAL #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Bathroom 3**  
TEAL #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Bathroom 3**  
TEAL #3 DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Bathroom 3**  
TEAL #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Bathroom 3**  
TEAL #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Bathroom 4**  
TEAL #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Bathroom 4**  
TEAL #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Bathroom 4**  
TEAL #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Bathroom 4**  
TEAL #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**5 Bathroom 5**  
TEAL #5 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**5 Bathroom 5**  
TEAL #5 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**5 Bathroom 5**  
TEAL #5 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**5 Bathroom 5**  
TEAL #5 DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Kitchen**  
ORANGE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Kitchen**  
ORANGE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Kitchen**  
ORANGE DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Kitchen**  
ORANGE DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Living Room**  
YELLOW DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Living Room**  
YELLOW DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Living Room**  
YELLOW DOT

---

Name/Description:

---


Contents:

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---

**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Living Room**  
YELLOW DOT

---

Name/Description:

---

Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Dining Room**  
GREEN DOT

Name/Description:

Contents:

BOX #: \_\_\_\_\_

OPEN FIRST

**Dining Room**  
GREEN DOT

Name/Description:

Contents:

BOX #: \_\_\_\_\_

OPEN FIRST

**Dining Room**  
GREEN DOT

Name/Description:

Contents:

BOX #: \_\_\_\_\_

OPEN FIRST

**Dining Room**  
GREEN DOT

Name/Description:

Contents:

BOX #: \_\_\_\_\_

OPEN FIRST

**2 Breakfast Nook**  
GREEN #2 DOT

Name/Description:

Contents:

BOX #: \_\_\_\_\_

OPEN FIRST

**2 Breakfast Nook**  
GREEN #2 DOT

Name/Description:

Contents:

BOX #: \_\_\_\_\_

OPEN FIRST

**2 Breakfast Nook**  
GREEN #2 DOT

Name/Description:

Contents:

BOX #: \_\_\_\_\_

OPEN FIRST


**2 Breakfast Nook**  
GREEN #2 DOT

Name/Description:

Contents:

BOX #: \_\_\_\_\_

OPEN FIRST

 **Laundry Room**  
BLUE DOT

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Name/Description:

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Contents:

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---

**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Laundry Room**  
BLUE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Laundry Room**  
BLUE DOT

---

Name/Description:

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Contents:

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---

**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Laundry Room**  
BLUE DOT

---

Name/Description:

---


Contents:

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---

**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Home Office**  
BLUE DOT

---

Name/Description:

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Contents:

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---

**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Home Office**  
BLUE DOT

---

Name/Description:

---


Contents:

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---

**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Home Office**  
BLUE DOT

---

Name/Description:

---


Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Home Office**  
BLUE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Bonus Room**  
PURPLE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Bonus Room**  
PURPLE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Bonus Room**  
PURPLE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Bonus Room**  
PURPLE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**1 Main Garage**  
LAVENDER #1 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**1 Main Garage**  
LAVENDER #1 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**1 Main Garage**  
LAVENDER #1 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**1 Main Garage**  
LAVENDER #1 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2** **Garage 2**  
LAVENDER #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2** **Garage 2**  
LAVENDER #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2** **Garage 2**  
LAVENDER #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2** **Garage 2**  
LAVENDER #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Pool Area**  
PINK DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Pool Area**  
PINK DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Pool Area**  
PINK DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Pool Area**  
PINK DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Pool Room**  
PINK #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Pool Room**  
PINK #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Pool Room**  
PINK #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**2 Pool Room**  
PINK #2 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Backyard**  
PINK #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Backyard**  
PINK #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Backyard**  
PINK #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**3 Backyard**  
PINK #3 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Driveway**  
PINK #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Driveway**  
PINK #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Driveway**  
PINK #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**4 Driveway**  
PINK #4 DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Storage**  
PURPLE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Storage**  
PURPLE DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Storage**  
PURPLE DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

**Storage**  
PURPLE DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Attic**  
PURPLE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Attic**  
PURPLE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Attic**  
PURPLE DOT

---

Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

 **Attic**  
PURPLE DOT

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Name/Description:

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Contents:

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**BOX #:** \_\_\_\_\_  OPEN FIRST

# MASTER BEDROOM · Primary Suite

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BEDROOM 2

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BEDROOM 3

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BEDROOM 4

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BEDROOM 5

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BEDROOM 6

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BEDROOM 7

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# NURSERY · Baby's Room

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BATHROOM 1 · Master Bath

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BATHROOM 2

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BATHROOM 3

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BATHROOM 4

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BATHROOM 5

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# KITCHEN

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# LIVING ROOM

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# DINING ROOM

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BREAKFAST NOOK · Eat-In Area

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# LAUNDRY ROOM

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# HOME OFFICE

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BONUS ROOM · Playroom / Media

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# MAIN GARAGE

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# GARAGE 2

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# POOL AREA

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# POOL ROOM · Pool House

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# BACKYARD · Patio / Yard Items

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____

# DRIVEWAY · Large / Heavy Outdoor

NAME / DESCRIPTION: \_\_\_\_\_

BOX #	CONTENTS DESCRIPTION	PRIORITY	NOTES
1	_____	<input type="checkbox"/> HIGH	_____
2	_____	<input type="checkbox"/> HIGH	_____
3	_____	<input type="checkbox"/> HIGH	_____
4	_____	<input type="checkbox"/> HIGH	_____
5	_____	<input type="checkbox"/> HIGH	_____
6	_____	<input type="checkbox"/> HIGH	_____
7	_____	<input type="checkbox"/> HIGH	_____
8	_____	<input type="checkbox"/> HIGH	_____
9	_____	<input type="checkbox"/> HIGH	_____
10	_____	<input type="checkbox"/> HIGH	_____
11	_____	<input type="checkbox"/> HIGH	_____
12	_____	<input type="checkbox"/> HIGH	_____
13	_____	<input type="checkbox"/> HIGH	_____
14	_____	<input type="checkbox"/> HIGH	_____
15	_____	<input type="checkbox"/> HIGH	_____
16	_____	<input type="checkbox"/> HIGH	_____
17	_____	<input type="checkbox"/> HIGH	_____
18	_____	<input type="checkbox"/> HIGH	_____
19	_____	<input type="checkbox"/> HIGH	_____
20	_____	<input type="checkbox"/> HIGH	_____
21	_____	<input type="checkbox"/> HIGH	_____
22	_____	<input type="checkbox"/> HIGH	_____