



The Nice List

CHRISTMAS 2017 SHOPPING LIST



NAME	RELATIONSHIP	ITEM / BUDGET	DONE
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>
	<input type="checkbox"/> SIGNIFICANT OTHER / SPOUSE <input type="checkbox"/> FAMILY <input type="checkbox"/> CO-WORKER <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER:		<input type="checkbox"/>

Holiday Card List



		2017	2018	2019	2020
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				

Holiday Card List



		20__	20__	20__	20__
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				
NAME:	SENT:				
ADDRESS:	RECV'D:				
CITY/PROVINCE/POST:	NOTES:				

Gift Planner

CHRISTMAS 2017



NAME:	AGE:	RELATIONSHIP:
INTERESTS:	FAVOURITES:	
CLOTHING SIZES:	PERSONALITY:	
WANTS:	NEEDS:	

ITEM / IDEA	WHERE TO BUY	BUDGET	ACTUAL	PURCHASED	WRAPPED
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

BUDGET: _____ ACTUAL SPENT: _____

CHRISTMAS 2017



NAME: _____

AGE:

RELATIONSHIP:

[illegible]

BUDGET: _____ ACTUAL SPENT: _____

WWW.OTTAWAMOMMYCLUB.CA

CATEGORY	BUDGET	ACTUAL
TOTALS:		

W W W . O T T A W A M O M M Y C L U B . C A

My Wish List



MY NAME IS: _____

A FEW OF MY FAVOURITE THINGS...

i WOULD LIKE...

i REALLY NEED...

MY HOBBIES & INTERESTS ARE...

i WANT TO READ...

i WILL WEAR...

SOMETHING i WOULD LIKE TO GIVE TO SOMEONE ELSE...



Christmas Menu

BREAKFAST / BRUNCH



Menu	

shopping list	notes

LUNCH



W W W . O T T A W A M O M M Y C L U B . C A

DINNER



NIBBLES & SNACKS



W W W . O T T A W A M O M M Y C L U B . C A

Recipe List



RECIPE	SOURCE	PAGE #	PREP TIME	BAKE TIME	SERVES

Recipe for:



ingredients

instructions

Baking Planner



ITEM	NEEDED BY	FOR	NOTES	DONE
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>
		<input type="checkbox"/> HOME <input type="checkbox"/> GIFT <input type="checkbox"/> PARTY/EVENT		<input type="checkbox"/>

Black Friday

SHOPPING LIST



STORE:

ITEM	FOR	TIME	PRICE / NOTES

STORE:

ITEM	FOR	TIME	PRICE / NOTES

Cyber Monday

SHOPPING LIST



WEBSITE:

ITEM	FOR	TIME	PRICE / NOTES

WEBSITE:

ITEM	FOR	TIME	PRICE / NOTES

Holiday Bucket List

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Grocery List

PRODUCE

PANTRY

BREAD & BAKERY

MEAT & FISH

DELI & DAIRY

FROZEN FOODS

BEVERAGES

OTHER

[illegible]

Places to Be

EVENT	LOCATiON	DATE	TIME	GiFT	GOODiE



Weekly Planner



MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

SUNDAY



Notes