



YEAR:

	NAME:					NAME:			
Gift Ideas:		\$	Ø	旹	Gift Ideas:		\$	Ø	Ħ
	TOTAL :					TOTAL :			
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MONTH:

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12:30					TO-DO LIST:
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4:30					
5:00					
5:30					
6:00				0	
6:30					
7:00					NOTES:
7:30					
8:00					
BEA	KFAST	LUNCH	DINNER		



MONTH:

BUDGET:

ITEM	BUDGETED	FINAL COST	BALANCE	NOTES



BOX LABEL:	BOX LABEL:	BOX LABEL:
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YEAR:

APPETIZERS:	DRINKS:
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ENTREES:	GROCERY SHOPPING LIST:
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SIDES:	O
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IDEAS:	FAVORS:
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DECOR:	0
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ACTIVITIES:	
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YEAR

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TOTA	L NUMBER OF GUESTS:			

TOTAL NUMBER OF GUESTS:			
GUEST NOTES:			