FAMILY PREPAREDNESS TEST

*** Are you following the prophet regarding being temporally prepared for adversity?*** First Four recommendations from the First Presidency are:

- 1. Are you building and rotating through a three month supply of foods you already eat?
- 2. Do you have emergency water storage and do you have the equipment and ability to purify more?
- 3. Are you paying a full tithe, striving to get out of debt and stay out of debt, and starting a savings program, even if it is small?
- 4. Are you storing a long term supply of basic foods, that are life sustaining, like wheat, rice, and beans, salt, garden seeds, etc...(most having a thirty year or more shelf life) that doesn't need to be rotated as often?

| Additional ideas to talk about for family home evening: | | |
|---|-----|----|
| Has your family rehearsed Fire Escape route from your home? | YES | NO |
| Does your family know what to do Before, During, and After and Earthquake? | YES | |
| Do they know what to do Before, Buring, and Arter and Earthquake? Do they know what other Emergency Situations are Possible for your Area? | YES | |
| Do you have Heavy Objects hanging over beds that could fall during an earthquake? | | |
| | YES | |
| Do you Keep Shoes near or under you bed to protect your feet in case of Broken Glass? | YES | |
| If a WATER line has broken during an earthquake, Do you know how to shut off Your Water Main? | | |
| Can Your Water Main be shut off by hand without the use of a tool? | YES | |
| Do you have the tool if needed? | YES | |
| Do you know where the MAIN GAS shut off valve to your house is located? | YES | |
| If you smell gas, do you know how & would you be able to shut off this valve? | YES | |
| Gas Valves Cannot usually be shut off by hand, IS there a tool near your valve? | YES | |
| Would you be able to safely restart your furnace when gas is safely available? | YES | |
| Do you have working smoke alarms in the proper places to warn you of fire? | YES | |
| In case of a MINOR fire, do you have a fire extinguisher that you KNOW how to use? | YES | NO |
| Do you have Duplicate Keys and copies of important paper work stored outside of your home? | YES | NO |
| Do you have access to an OPERATIONAL flashlight in every bedroom? | | |
| (Use of candles is not recommended unless you are absolutely sure there is NO leaking GAS) | YES | NO |
| Does everyone in the household know who their emergency out of area phone contact is? | YES | NO |
| Do they have this number as well as other family members numbers memorized? | YES | NO |
| Do you have a First Aid Kit in your home and in each car? | YES | NO |
| Do you have work gloves and some tools for minor rescue and clean up? | YES | NO |
| Do you have a functional Emergency Radio to receive emergency broadcast information? | YES | NO |
| IN CASE OF EVACUTATION | | |
| If you have to evacuate your home, have you discussed a meeting place? | YES | |
| Do you have access to an Emergency Evacuation Kit (72 hour) with food, water, & other provisions? | YES | NO |
| Would you be able to carry or transport these kits, if you had to? | YES | NO |
| IF YOU CAN STAY HOMEbut the EMERGENCY LASTS FOR MORE THAN THREE | | |
| DAYS or longer DEPENDING on the Severity of the Disaster | | |
| Would you have sufficient food? | YES | |
| Would you have the means to cook the food without gas or electricity? | YES | |
| Would you have sufficient water for drinking, cooking, and sanitary needs? | YES | |
| DO you have a way to purify more water if you run out? Without using up cooking fuel? | YES | NO |
| Have you stored extra "specialty items" that maybe needed for your family, such as baby supplies, | | |
| medication, and/or food for your pets? | YES | NO |
| Do you have Emergency Cash on hand? (During an emergency ATM's are closed) | YES | NO |
| Without Electricity and/or Gas, Do you have a way to heat at least Part of your house? | YES | NO |
| Do you have a plan for toilet facilities if there is an extended water shortage? | YES | NO |
| If a sewer line breaks in the city, do you know how to protect your home from sewer back flow? | YES | NO |
| Do you have an ability to communicate if phone lines go down, such as short wave radio, or HAM? | YES | NO |
| In case of Pandemic, and work or school closures, are you prepared to quarantine (stay home) | | |
| for up to 90 days? | YES | NO |
| Do you have a supply of food, clothing, and fuel where appropriate: | | |
| For 90 days? For Sixth Months, For One year? | YES | NO |
| Do you have Emergency Shelter or All Weather Tent? | YES | NO |