

YOUR DISASTER PLAN

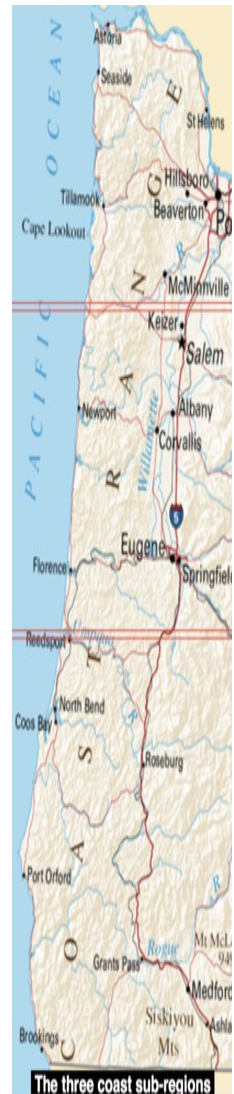
Avery T. Horton, Jr.
Southwestern
Oregon Preppers

AVERY

- B.S. DEGREE COMPUTER SCIENCE
- SURVIVALIST/PREPPER SINCE 1980s
- C.E.R.T. TRAINED AND C.E.R.T. TRAINER
- BASIC DISASTER LIFE SUPPORT
- CEETEP
- FIRST AID/CPR CARDHOLDER
- HOME CARE WORKER

SOUTHWESTERN OREGON PREPPERS

- Meet monthly
- Brookings through Reedsport
- Like minded people sharing ideas
- Teach skills
- Self-reliant



YOU

- NAME
- ADDRESS
- TELEPHONE
- WORK – NAME, ADDRESS, PHONE, MANAGER'S NAME/PHONE
- EMAIL ADDRESS
- PHOTO OF YOU
- THE MOST IMPORTANT THING TO KNOW ABOUT ME IS...
- DO YOU NEED ASSISTANCE TO HEAR?
- DO YOU NEED ASSISTANCE TO ANSWER QUESTIONS?
- DO YOU HAVE A MEDICAL OR HEALTH CONCERN NOW?
- DO YOU NEED MEDICAL EQUIPMENT OR MEDICINE FOR DAILY LIVING?
- DO YOU NORMALLY NEED A CAREGIVER, PERSONAL ASSISTANT OR SERVICE ANIMAL?
- DO YOU HAVE ANY SEVERE ALLERGIES TO ENVIRONMENT, FOOD OR MEDICINE?
- RELIGIOUS PREFERENCE

YOUR FAMILY

- NAME
- RELATIONSHIP
- DATE OF BIRTH
- PHOTO
- SCHOOL
- WORK
- WHAT'S IMPORTANT TO KNOW ABOUT THEM

EMERGENCY CONTACTS

- CAREGIVER CONTACT INFORMATION
- FAMILY/FRIEND (RELATIONSHIP) CONTACT INFORMATION IN AREA
- FAMILY/FRIEND (RELATIONSHIP) CONTACT INFORMATION OUT OF AREA
- DOCTOR CONTACT INFORMATION / POLICY NUMBER
- PHARMACIST CONTACT INFORMATION / POLICY NUMBER
- MEDICAL INSURANCE / POLICY NUMBER
- VET/KENNEL (PETS)
- POWER OF ATTORNEY (HEALTH CARE, FINANCIAL, ETC...)
- POLICE
- FIRE
- EMERGENCY MANAGEMENT
- HOSPITAL

WHERE DO I GO?

- EMERGENCY MEETING LOCATION
- EMERGENCY SHELTER LOCATION
- EVACUATION LOCATION

HOME

- WATER SHUT OFF LOCATION
- ELECTRIC SHUT OFF LOCATION
- GAS SHUT OFF LOCATION
- FIRE EXTINGUISHER LOCATIONS
- ESCAPE ROUTES

MAPS

- HOME
- WORK
- SCHOOL
- NEIGHBORHOOD
- CITY
- COUNTY
- STATE
- PLACES TO SHELTER, HIDE, STAY
WARM/DRY

MEDICINE

- LIST OF ALLERGIES
- OVER THE COUNTER MEDICATIONS
- PRESCRIPTION PRINTOUTS
- MEDICINE (FOR EACH PRESCRIPTION)
 - DOSAGE
 - AMOUNT
 - HOW OFTEN YOU TAKE IT

IMPORTANT PAPERS/VITAL RECORDS

- INSURANCE POLICIES
- ADVANCED MEDICAL DIRECTIVE
- ORGAN DONOR
- IMMUNIZATION RECORD
- BIRTH/MARRIAGE CERTIFICATES
- TITLES/DEEDS/LICENSES
- BANK/FINANCIAL RECORDS

PETS

- NAME OF SERVICE ANIMAL
- NAME OF PET(S)
- TYPE OF PET(S)
- PHOTO OF PET(S)
- WHAT'S IMPORTANT TO KNOW ABOUT PET

PERSONAL PROTECTION

- SELF DEFENSE
- WEAPONS
- AVOID/EVADE/ESCAPE
- CAMOUFLAGE
- SUBTERFUGE

You're On Your Own



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are YOU prepared