

Fall Decluttering Checklist

CLEAR OUT...

- ☐ SUMMER CLOTHES I DIDN'T WEAR
- ☐ SHOES THAT NO LONGER FIT OR FEEL COMFORTABLE
- ☐ WORN-OUT TOWELS + LINENS
- ☐ EXPIRED TOILETRIES
- ☐ EXPIRED OR UNUSED MEDICATIONS*
- ☐ OLD MAKEUP + BEAUTY PRODUCTS
- ☐ UNUSED KITCHEN GADGETS
- ☐ DUPLICATE KITCHEN ITEMS
- ☐ EXPIRED PANTRY FOOD
- ☐ FOOD WE WON'T USE
- ☐ OLD MAGAZINES + CATALOGS
- ☐ UNNEEDED PAPERWORK
- ☐ BROKEN HOUSEHOLD ITEMS
- ☐ TOYS AND GAMES NO LONGER USED
- ☐ UNUSED DÉCOR
- ☐ OLD CANDLES
- ☐ EXCESS REUSABLE BAGS
- ☐ UNUSED GARAGE AND STORAGE ITEMS
- ☐ OUTDOOR ITEMS NO LONGER NEEDED
- ☐ SEASONAL DÉCOR I NO LONGER LOVE

*DISPOSE OF MEDICATIONS ACCORDING TO LOCAL RECOMMENDATIONS

DECIDE WHERE IT GOES

DONATE_____

SELL_____

TOSS / RECYCLE_____

RELOCATE_____

