

Appliances

ITEM/DESCRIPTION	HAVE	NEED	REGISTERED
BLENDER _____	_____	_____	<input type="checkbox"/>
CAN OPENER _____	_____	_____	<input type="checkbox"/>
COFFEE MAKER _____	_____	_____	<input type="checkbox"/>
ESPRESSO/CAPPUCCINO MAKER _____	_____	_____	<input type="checkbox"/>
CROCKPOT _____	_____	_____	<input type="checkbox"/>
DEEP FAT FRYER _____	_____	_____	<input type="checkbox"/>
ELECTRIC FRY PAN _____	_____	_____	<input type="checkbox"/>
ELECTRIC KNIFE _____	_____	_____	<input type="checkbox"/>
FOOD PROCESSOR _____	_____	_____	<input type="checkbox"/>
HAND MIXER _____	_____	_____	<input type="checkbox"/>
STANDING MIXER _____	_____	_____	<input type="checkbox"/>
PASTA MAKER _____	_____	_____	<input type="checkbox"/>
BREAD MACHINE _____	_____	_____	<input type="checkbox"/>
WAFFLE IRON _____	_____	_____	<input type="checkbox"/>
CORN POPPER _____	_____	_____	<input type="checkbox"/>
JUICER _____	_____	_____	<input type="checkbox"/>
TOASTER _____	_____	_____	<input type="checkbox"/>
TOASTER OVEN _____	_____	_____	<input type="checkbox"/>
ICE CREAM FREEZER _____	_____	_____	<input type="checkbox"/>
IRON _____	_____	_____	<input type="checkbox"/>
ELECTRIC FAN _____	_____	_____	<input type="checkbox"/>
SMOKE DETECTOR _____	_____	_____	<input type="checkbox"/>

Fine Accessories

ITEM/DESCRIPTION	HAVE	NEED	REGISTERED
CANDLESTICKS _____	_____	_____	<input type="checkbox"/>
CANDELABRA _____	_____	_____	<input type="checkbox"/>
CANDLES _____	_____	_____	<input type="checkbox"/>
CHAFING DISH _____	_____	_____	<input type="checkbox"/>
CHEESE BOARD _____	_____	_____	<input type="checkbox"/>
CHIP 'N DIP SET _____	_____	_____	<input type="checkbox"/>
COASTERS _____	_____	_____	<input type="checkbox"/>
COPPER ITEMS _____	_____	_____	<input type="checkbox"/>
DECORATIVE GLASSES _____	_____	_____	<input type="checkbox"/>
DECANTER _____	_____	_____	<input type="checkbox"/>
DECORATIVE PLATES _____	_____	_____	<input type="checkbox"/>
FONDUE POT _____	_____	_____	<input type="checkbox"/>
ICE BUCKET _____	_____	_____	<input type="checkbox"/>
SALAD BOWL _____	_____	_____	<input type="checkbox"/>
SERVING BOWL _____	_____	_____	<input type="checkbox"/>
RELISH TRAY _____	_____	_____	<input type="checkbox"/>
TRIVET _____	_____	_____	<input type="checkbox"/>
WICKER ITEMS _____	_____	_____	<input type="checkbox"/>
WINE COOLER _____	_____	_____	<input type="checkbox"/>
SOUP TUREEN _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>

Bath Linens & Accessories

ITEM/DESCRIPTION/COLOR	HAVE	NEED	REGISTERED
BATH TOWEL _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
HAND TOWEL _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
FINGER TIP TOWEL _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
BODY SHEET _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
CONTOUR RUG _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
TANK SET _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
LID COVER _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
FINGER TIP HOLDER _____	_____	_____	<input type="checkbox"/>
HAMPER _____	_____	_____	<input type="checkbox"/>
MIRROR _____	_____	_____	<input type="checkbox"/>
SCALE _____	_____	_____	<input type="checkbox"/>
SHOWER CURTAIN _____	_____	_____	<input type="checkbox"/>
SOAP DISH _____	_____	_____	<input type="checkbox"/>
TISSUE COVER _____	_____	_____	<input type="checkbox"/>
TOOTHBRUSH HOLDER _____	_____	_____	<input type="checkbox"/>
TOWEL STAND _____	_____	_____	<input type="checkbox"/>
WALL SHELF _____	_____	_____	<input type="checkbox"/>
WASTEBASKET _____	_____	_____	<input type="checkbox"/>

Table Linens

ITEM/DESCRIPTION/COLOR	HAVE	NEED	REGISTERED
TABLECLOTH _____	_____	_____	<input type="checkbox"/>
FORMAL _____	_____	_____	<input type="checkbox"/>
CASUAL _____	_____	_____	<input type="checkbox"/>
LACE _____	_____	_____	<input type="checkbox"/>
PLACEMATS _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
NAPKINS _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
NAPKIN RINGS _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>

Luggage

ITEM/DESCRIPTION/COLOR	HAVE	NEED	REGISTERED
PULLMAN _____	_____	_____	<input type="checkbox"/>
24" , 26" , 29" _____	_____	_____	<input type="checkbox"/>
COMPANION 24" _____	_____	_____	<input type="checkbox"/>
3 SUITER _____	_____	_____	<input type="checkbox"/>
GARMENT BAG M/F _____	_____	_____	<input type="checkbox"/>
CARRY-ON _____	_____	_____	<input type="checkbox"/>
OVERNIGHT _____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>