

CHRISTMAS GIFT PLANNER

Person/Family : _____		Budget : \$ _____.	Actual : \$ _____.
Gift Ideas:	Store	Price	
1. _____	_____	\$ _____.	
2. _____	_____	\$ _____.	
3. _____	_____	\$ _____.	
Chosen Gift : _____			
Cost : \$ _____.	Shipping : \$ _____.	Bought: <input type="checkbox"/>	Wrapped: <input type="checkbox"/> Delivered: <input type="checkbox"/>
Notes : _____			

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