

BEDROOM

<input type="checkbox"/> Change sheets	<input type="checkbox"/> Flip mattress	<input type="checkbox"/> Switch out winter clothes
<input type="checkbox"/> Clean dresser drawers	<input type="checkbox"/> Clean closet	<input type="checkbox"/> _____

BATHROOM

<input type="checkbox"/> Organize cabinets	<input type="checkbox"/> Clean bathtub	<input type="checkbox"/> _____
<input type="checkbox"/> Sanitize counters & sink	<input type="checkbox"/> Clean toilet inside & outside	<input type="checkbox"/> _____

KITCHEN

<input type="checkbox"/> Empty drawers & cabinets	<input type="checkbox"/> Clean & organize pantry	<input type="checkbox"/> Check expiration dates
<input type="checkbox"/> Wipe drawers & cabinets down	<input type="checkbox"/> Wipe down microwave	<input type="checkbox"/> Sanitize counters
<input type="checkbox"/> Organize as you refill	<input type="checkbox"/> Clean & organize fridge & freezer	<input type="checkbox"/> Clean & sanitize trash cans

LIVING ROOM

<input type="checkbox"/> Dust fan	<input type="checkbox"/> Clean throw pillows	<input type="checkbox"/> Wipe down furniture	<input type="checkbox"/> Polish furniture
<input type="checkbox"/> Remove & clean curtains	<input type="checkbox"/> Vacuum under furniture	<input type="checkbox"/> Replace batteries in smoke detector	<input type="checkbox"/> _____

ALL ROOMS

<input type="checkbox"/> Vacuum all carpets	<input type="checkbox"/> Shampoo carpets	<input type="checkbox"/> Empty all trash cans
<input type="checkbox"/> Wipe down doors, knobs, & baseboards	<input type="checkbox"/> Mop floors	<input type="checkbox"/> _____
<input type="checkbox"/> Dust everything	<input type="checkbox"/> Wipe down blinds	<input type="checkbox"/> _____

OUTSIDE

<input type="checkbox"/> Clean gutters	<input type="checkbox"/> Trim trees	<input type="checkbox"/> Touch up paint
<input type="checkbox"/> Wash windows	<input type="checkbox"/> Power wash outside furniture & concrete	<input type="checkbox"/> _____

OTHER

<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____