

NAME.....*Carol Blanka*..... BIRTHDAY.....*6/19*.....
ALLERGIES.....*none*.....

my favorite things

Teacher Supplies.....
Color.....*any*.....
Sweets/Candy.....*none*.....
Salty Snack.....*nuts, pork rinds*.....
Local Restaurant.....*any*.....
Chain Restaurant.....*any*.....
Place to Shop.....*any*.....
Soda/Drink.....*water*.....
Flower.....*all*.....

Coffee or Tea

Mall or Amazon

none **Donut, Taco or Bagel**

Cookie or Cupcake *none*

Fruit or Chocolate

Theater or Living room

either