

NAME _____

PERIOD

MECHANICAL	XX	XX	CALORIES	JOULES	KW-HRS	Jelly Doughnuts	
XX	XX	GPE					
XX	XX	KE					
XX	XX	WORK					
XX	physics way: personal mechanical	XX					
**	Activities Total: personal mechanical	XX					
XX	Food Intake	XXXX					
ELECTRICAL	XX	XXX					
XX	Bill/or meter	XX					
**	List Total	XX					
**HEAT	XX	GalOil:					
**TRANSPORTATION	XX	GalGas:					
SHOWER	XX	XX					
XX	Heat Water	XX					
XX	LiftWater	XX					
**	totalShower	XX					
TOTALS(o nly**)							