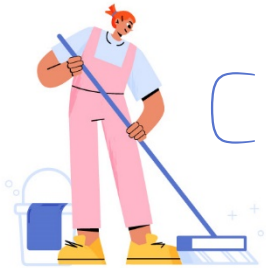
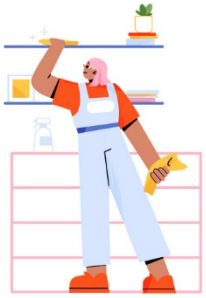


CLEANING CHECKLIST



COMPANY NAME _____ WEEK NO _____

CLEANER NAME _____ MONTH _____

SL	DAILY CLEANING TASK	MON	TUE	WED	THU	FRI	SAT	SUN
		☐	☐	☐	☐	☐	☐	☐
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		☐	☐	☐	☐	☐	☐	☐

ADDITIONAL NOTES

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MONTHLY CHECKLIST

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