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# Restroom check sheet

Post it inside the door. Walk through, check off what you looked at and initial the line. Made for offices, shops and other workplaces.

**Location** _____ **Week of** _____

| Day | Time | Paper towels | Bath tissue | Soap | Trash | Floor | Initials |
|---|---|---|---|---|---|---|---|
| **Monday** | | | | | | | |
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| | | | | | | | |
| **Tuesday** | | | | | | | |
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| **Wednesday** | | | | | | | |
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| | | | | | | | |
| **Thursday** | | | | | | | |
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| | | | | | | | |
| **Friday** | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| **Saturday** | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| **Sunday** | | | | | | | |
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## Running low, or something needs fixing?