RESTROOM MAINTENANCE LOG

Building: _____ Room: _____

Month: _____ Frequency: _____

Date	Cleaned by	Toilet Paper		Seat Covers		Paper Towels		Soap Dispensers		Trash		Air Freshener		Toilets Cleaned	Sinks Cleaned	Floors Swept	Floors Mopped	Mirrors Cleaned	Initials
		Checked	Filled	Checked	Filled	Checked	Filled	Checked	Filled	Checked	Emptied	Checked	Replaced						