

INVENTORY OF SUPPLIES FOR SCHOOL SANITATION MANAGEMENT

SCHOOL:		CLEANER NAME:		TERM NO:		TERM DATES:	
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Item	MINIMUM	WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5	WEEK 6	WEEK 7	WEEK 8	WEEK 9	WEEK 10	WEEK 11	WEEK 12
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CLEANER SUPPLIES

Gloves (# intact)	1 pair												
Boots (pairs)	1 pair												
Mask (# intact)	2 masks												
Overalls (sets intact)	1 set												

CLEANING SUPPLIES

Bleach cleaner (# bottles)	1 bottle												
Soapy cleaner (# bottles)	1 bottle												
Cleaning cloths (# for toilets)	2 cloths												
Mop (# for toilets)	1 mop												
Bucket (#)	1 bucket												
Scrub brush (# for toilets)	1 brush												
Toilet brush (#)	2 brushes												
Bin bags (#)	5 bags												

HYGIENE SUPPLIES

Hand soap (mℓ or # bars)	2500 mℓ												
Toilet paper (# rolls)	about 50 rolls												
Pads (#)	10 pads per month per girl												

CLEANER SIGN:													
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HSM OR PRINCIPAL SIGN:													
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NOTE: THIS FORM SHOULD BE FILLED OUT EACH WEEK BY THE CLEANER AND CHECKED AND SIGNED-OFF BY THE PRINCIPAL OR HSM, TO MAKE SURE SHORTAGES ARE REPORTED! WHEN MATERIALS REACH THE MINIMUM AMOUNT, THEY SHOULD BE RE-STOCKED