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| TARİH | PERSONELİN ADI SOYADI | SAAT: | ZEMİN | LAVABO | SIVI SABUN | TUVALET KAĞIDI-HAVLU | PERSONEL İMZA | KONTROL SAAT | KONTROL EDEN İMZA |
| …./…../202… |  | 8:00 |  |  |  |  |  |  |  |
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