

The Auntie Bacterial Cleaning Co.

SERVICE DATE: _____

NOTES TO THE CLEANER

BUDGET CLEAN []
GUARANTEED CLEAN []

TO DO MAIN LIVING AREA		<input checked="" type="checkbox"/>
1		
2		
3		
4		
5		

TO DO BEDROOMS		<input checked="" type="checkbox"/>
1		
2		
3		
4		
5		

TO DO BATHROOMS		<input checked="" type="checkbox"/>
1		
2		
3		
4		
5		

TO DO OTHER		<input checked="" type="checkbox"/>
1		
2		
3		
4		
5		

TO DO TOP PRIORITIES		<input checked="" type="checkbox"/>
1		
2		
3		
4		
5		

TO DO IF TIME ALLOWS		<input checked="" type="checkbox"/>
1		
2		
3		
4		
5		