**MAHOGANY DINING ROOM**

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| **Daily Mis en Place Checklist – Before Operation** | | | | |
| **No**. | **Task** | **Time Start** | **Time**  **End** | **Remarks** |
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**Manager on Duty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAHOGANY DINING ROOM**

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| **Daily Mis en Place Checklist – After Operation** | | | | |
| **No**. | **Task** | **Time Start** | **Time**  **End** | **Remarks** |
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