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| **Name** | **Signature** | **Did you bring your item(s)?** **Yes No** |
|  Type students’ names below. Copy sign-in sheets for each class.  |  |  |  |
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| **Name** | **Signature** | **Did you bring your item(s)?****Yes No** |
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| **Name** | **Signature** | **Did you bring your item(s)?** **Yes No** |
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