WA Hermanson Daily COVID-19 Questionnaire																	
		JOB SITE:															
		DATE:															
	Showed up for work?			Been near/around anyone exposed?		Returned from "High Risk" region?		Temperature taken (Fever 100.4 or greater)		Cough?		Shortness of Breath / Difficulty Breathing?		Or at least two of these symptoms: chills, repeated shaking w/chills, headache, sore throat, new loss of taste or smell			
Name	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	