**EMPLOYEE DAILY ACTIVITY LOG**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Date** | **Log** |  |  |  |  |  |  |  |  |  | **Reviewed** | | | **Date** |
| **Prepared** | **Period** | **Employee Name** | |  |  |  | **LA#** |  |  |  | **By** | | | **Reviewed** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | | |  |  | |  |  |  |
|  |  |  | **A.** | **B.** |  | **LA Internal Use Only** | | | | | |  |  | **E.** |
| Describe Activity (Or | | Start | Total Minutes | Total Minutes |  |  |  |  |  |  |  |  |  | Total Time |
|  | **C.** | |  |  |  | **D.** |  |  |
| Participant ID) | | Time | of Nutrition | of |  |  |  |  |  |  | (A, B, C, D) |
|  | Other WIC | |  |  |  | Other |  |  |
|  |  |  | Education | Breastfeeding |  |  |  |  |  |  |  |
|  |  |  |  | Activities | |  |  |  | Activities |  |  |  |
|  |  |  | Activities | Promotion and |  |  |  |  |  |  |  |
|  |  |  |  | (Non- | |  |  | (Non-WIC | |  |  |  |
|  |  |  | (other than | Support |  |  |  |  |  |  |
|  |  |  |  | Nutrition | |  |  |  | Program) |  |  |  |
|  |  |  | breastfeeding) | Activities |  |  |  |  |  |  |  |
|  |  |  |  | Education) | |  |  |  |  |  |  |  |
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| **DAILY TOTALS** | |  |  |  |  |  |  |  |  |  |  |  |  |  |