FLOWING WELLS SCHOOLS PLANT MAINTENANCE WORK ORDER

			REPAIR						
SCHOOL/DEPT	BLDG AREA or ROOM		MANUFACTURE		PRIORITY	WORK ORDER NUMBER			
NAME OF REQUESTOR	TELEPHONE NUMBER				REQUEST DATE	COMPLETION DATE			
			APPROVAL						
SIGNATURE: PRINCIPAL/SUPV.		DATE	DISAPPROVAL		DATE	SIGNATURE: MTCE. DIR.			
JOB DESCRIPTION					MAN HOURS	LABOR COST			

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TELEPHONE NUMBER				REQUEST DATE	COMPLETION DATE				
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	TELEPHO /SUPV.	/SUPV. DATE	BLDG AREA or ROOM MANUFACTURE TELEPHONE NUMBER APPROVAL /SUPV. DATE DISAPPROVAL	BLDG AREA or ROOM MANUFACTURE TELEPHONE NUMBER APPROVAL /SUPV. DATE DISAPPROVAL	BLDG AREA or ROOM MANUFACTURE PRIORITY TELEPHONE NUMBER REQUEST DATE APPROVAL DATE DATE DATE				

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