



Submitted by		Description of Work
Email		
Phone		
Department		
Building/Room		
Account number		
Date Submitted		
Completion By		Received by <input type="text"/>

Hours Worked Record			Materials Used Record		
Date	Time	Initials	Quantity	Item	Amount
			Total \$		
			Materials Ordered Record		
Date			Date	Item/Vendor	Amount
			Total \$		

Stock & Ordered Materials Total \$				<input type="text"/>	
Total hours	<input type="text"/>	x \$	<input type="text"/>	per hour + Other Misc. Charges of \$	<input type="text"/>
Total charges for the sheet \$				<input type="text"/>	