

ALMIRA SCHOOL DISTRICT NO. 17
ALMIRA WASHINGTON

MAINTENANCE/REPAIR WORK ORDER

Date: _____ Requested by: _____

Nature of work to be done: _____

Location: _____

Comments, or suggestions: _____

Please bring this order to the office and place in the box marked Work Orders. Mr. Chavez will distribute to the proper department.

FOR OFFICE USE

Date order received: _____ Who received order: _____

Date work completed: _____ Completed by:

Work approved by: _____ Date approved:

When the work is completed please return this order to the office for filing.