

SERVICE/WORK REQUEST

Dept. No. _____

WORK ORDER NO. _____
DESIGN NO. _____
<i>FOR FM USE ONLY</i>

**FACILITIES MANAGEMENT
UNIVERSITY OF HAWAII AT MANOA**

(Submit in duplicate, separate request for each job.)

Requester: _____ Position: _____ Date: _____

Signature: _____ Telephone: _____ Date Required: _____

Department: _____ Job Location: _____

<u>Service / Work Requested</u>	FOR FM USE ONLY	1	AC	
		2	CARP	
		3	CUST	
		4	ELEC	
		5	LAND	
		6	PAINT	
		7	PLUMB	
		8	TRUCK	
		9		

Fiscal Officer's Signature: _____ FO Code No.: _____

Account Code / Object Symbol: _____ Amount Charged: \$ _____

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