## **WORK ORDER REQUEST FORM**

	/E DIRECTOR'S MAILBOX OR EMAIL <u>INFO@THEMBC.ORG</u>
Requested by:	Date of Request:
Contact Name:	Contact Number:
AREA WHERE WORK IS TO BE PERFO	DRMED: Chapel
Senior Pastor's Study	Narthex
Senior Pastor's Waiting Room	Media Room
Offices (specify)	M.M. Peace Fellowship Hall
Trustee Room	Kitchen/Culinary Rooms
Outside-Trustee Room	Classroom (specify)
Offices/Annex Porch	, , , , , , , , , , , , , , , , , , , ,
Annex (specify)	Stairwell (specify)
Deacons' Room	Hallway (specify)
Sanctuary	Yard
Pulpit / Choir Loft	Parking Lot
Overflow	Sidewalk etc.
History Room	
Restrooms (specify)	
(4)	
Description of Services Requested:	
То	Be Used By Person(s) Handling Request
Was Work Performed?	Date Complete:/
Yes	Name of Person Handling Request:
No (specify why)	
	Executive Director Signature:
Total Time to Complete Task:	Cost/Services Rendered By Whom?
Comments:	1