LOGISTICS SERVICE REQUEST

UNLESS EXPLICITLY AGREED UPON, CHARGES WILL NOT EXCEED THE ESTIMATED AMOUNT. IF ONCE THE TASK IS IN PROGRESS IT IS DETERMINED THE TOTAL COST WILL EXCEED THE AUTHORIZED AMOUNT, THE POINT OF CONTACT WILL BE ADVISED AND AN EQUITABLE SOLUTION WILL BE NEGOTIATED.

STOREROOM CARD NUMBER:	PROJECT NUMBER:	FY:	DATE:	
DATE(S) TASKS TO BE COMPLETED:	ESTIMATED AMOUNT:	AUTHORI	IZED AMOUNT:	
CONTRACTENTANTS.	CONTRACT TELEPHONE.	MC.	ви вежном.	
CONTACT NAME:	CONTACT TELEPHONE:	MC:	BLDG/ROOM:	
WORK REQUEST (Breakdown by specific tasks):		I		
FOLLOWING TO BE COMPLETED BY LOGIST	CICS:			
SUMMARY OF COMPLETED TASKS:				
EQUIPMENT/PERSONNEL USED (Truck and driver - \$29/hr/Laborer - \$19/hr):		START TI	IME.	
EQUI MENT/LERSONNEL CSED (Truck and driver - \$27/11/Laborer - \$17/111).				
		CTOP TH		
		STOP TIM	STOP TIME:	
TOTAL AMOUNT CHARGED:				