



## MAINTENANCE / CUSTODIAL WORK REQUEST FORM

DATE SUBMITTED: \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

PHONE #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DESCRIPTION OF REQUESTED WORK:

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LOCATION: \_\_\_\_\_ MAIN SANCTUARY BUILDING  
\_\_\_\_\_ CHILDREN'S WING (ELEMENTARY)  
\_\_\_\_\_ FAMILY LIFE CENTER  
\_\_\_\_\_ EXTERIOR

ROOM # (IF AVAILABLE): \_\_\_\_\_

ACTUAL WORK PERFORMED

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DATE COMPLETED: \_\_\_\_\_