|  |
| --- |
| **Athelstone Uniting Church***Work Request* |
| **Facility or safety concern, including location:**(if helpful, please submit photos with work request)**Please submit request to Office Administrator** |  |
| **Requested by:** |  |
| **Date Work Request submitted to Office Coordinator:** |  |
| **Work carried out to address concern:** |  |
| **Work was carried out by:** |  |
| **Cost (if applicable):**  |   **Tax Invoice sent to Treasurer**  |
| **Date work completed:** |  |
| **Requestor notified of outcome (by Office Coord):** |  |
| **Any additional information:** |  |

Once job completed, work request to be filed in Church Office