

**MECHANICAL ENGINEERING**  
**Request for Engineering Machine Shop Services**  
 B250 Engineering Bldg. 5-1874

DEPARTMENT \_\_\_\_\_

ORDERED BY \_\_\_\_\_

DATE \_\_\_\_\_

ACCOUNT NO. \_\_\_\_\_

PHONE NO. \_\_\_\_\_

WORK ORDER NO. \_\_\_\_\_

ESTIMATED COST \_\_\_\_\_

MAXIMUM AUTHORIZED COST \_\_\_\_\_

Give a complete description of item or service requested

\_\_\_\_\_

Estimate Requested  Yes  No

\_\_\_\_\_

LABOR		
DATE	NAME	HOURS WORKED

MATERIALS	
DESCRIPTION OF MATERIALS	COST

Labor Total Hours \_\_\_\_\_

Hourly Labor Rate \_\_\_\_\_

Labor Total \_\_\_\_\_

Material Total \_\_\_\_\_

Invoice Amount \_\_\_\_\_

Date \_\_\_\_\_

Received and accepted by \_\_\_\_\_

Notes

\_\_\_\_\_