



MEMORANDUM

TO:

FROM: Kassandra Cauthorn, Unit Manager
 Facilities Maintenance Work Control

DATE: July 20, 2022

SUBJECT: Customer Project Request (CR) Approval/Disapproval
 Project

SCOPE:

We have estimated your requested work to cost \$ _____ as indicated on the enclosure. If there are any questions, please contact us to review the scope of the work estimated. We want to ensure a mutual understanding of your requirements.

Please sign below and indicate approval or disapproval to charge FOP _____ for the estimated amount. Prompt approval and return to Facilities Maintenance will permit us to schedule your work for accomplishment.

Failure to respond within 90 days will result in cancellation of the work order. Records of canceled projects are not maintained in our files.

Please direct inquiries to work control at 742-4OPS / 742-4677

KLC/

Enclosure

APPROVED **DISAPPROVED**

SIGNATURE AUTHORITY

DATE

16C-16E Funds will only be allowed when no other funding is available and must be approved by CFO

COMMENTS: _____