



**COMPLETION INFORMATION (Office use only)**

Completed Remarks:

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Materials Used:

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**WORK ORDER COSTS**

Approximate Material Cost: \_\_\_\_\_

Approximate Labour Cost: \_\_\_\_\_

Labour Time: \_\_\_\_\_

Should Resident Pay: Y / N (circle one)

Bill Amount: \_\_\_\_\_

Worker's Signature: \_\_\_\_\_