

**Chemistry Electronics Shop**  
**122 Natural Sciences Complex**  
**645-4100**  
**SERVICE REQUEST**

Work Order ID:

**Customer**

Research Head:

Department:

Requested By:

Office/Lab:

Telephone Number:

E- Mail:

Date Requested:

Account Number:

---

**Equipment**

Item No.:	Manufacturer:	*Model:	*Instrument Type:	*Serial Number:	Location:
-----------	---------------	---------	-------------------	-----------------	-----------

\* Required Field

**Work Description**

Item No.:	Work Description:
-----------	-------------------

**Service Comments**

Item No.:	Service Comments:	Time Expended:
-----------	-------------------	----------------

**Parts Used**

Item No.:	Quantity:	Part No.:	Description:	Price:	Amount:
-----------	-----------	-----------	--------------	--------	---------

---

**\*Principle Investigator Approval- X**

Date

**Serviced By-**

**Time Expended-**

**Release Date-**

**Component Cost-**