

**TSELANI/COTTONWOOD CHAPTER
MANPOWER ASSISTANCE REQUEST FORM**

Name of Requestor: _____

Date: _____

Office Phone: (_____) _____ - _____

Home/Cell Phone: (_____) _____ - _____

Location: _____

Type of work to be done:

- Home Construction: Size of House: _____
- Home Repair
- Home Renovation
- Corral Repair
- Wood Chopping (Only for Elderly and Handicap)
- Shed Repair
- Other: _____

Description of work to be done:

Materials Available:

- | | | |
|--|---------------------------------------|---|
| <input type="checkbox"/> Nails | <input type="checkbox"/> Plywood | <input type="checkbox"/> Posts/Fencing |
| <input type="checkbox"/> Sheetrock | <input type="checkbox"/> Wafer Boards | <input type="checkbox"/> Joint Compound |
| <input type="checkbox"/> Wall Boards | <input type="checkbox"/> Paint | <input type="checkbox"/> Taping Paper |
| <input type="checkbox"/> Roofing Paper | <input type="checkbox"/> Felt Paper | <input type="checkbox"/> Tiles/Flooring |
| <input type="checkbox"/> Cement | <input type="checkbox"/> Sand/Gravel | <input type="checkbox"/> 2x4,6,8,16 |

Materials still needed: _____

Are tools available for workers: ___no ___yes

Signature of Requestor: _____

Date: _____

ADMINISTRATION USE ONLY!!!

APPROVAL/DISAPPROVAL:

Authorized Personnel

Date

Date started: _____ by: _____

Date completed: _____

Comments:
