

ROBERT B. SAMUELS, INC.
TO: 352 PARK AVENUE SOUTH
NEW YORK, NY 10010

WORK ORDER

RBS ORDER NO. 26341
RBS JOB NO. 54605
CUSTOMER JOB NO. _____
CUSTOMER W.O. NO. _____
CUSTOMER P.O. NO. _____
JOB LOCATION 7 W.T.C.
23RD FLOOR

INVOICE TO: AMBASSADOR CONST.

ATTENTION: JAIR KLEIN

YOU ARE HEREBY AUTHORIZED AND REQUESTED TO PERFORM THE ADDITIONAL WORK SPECIFIED BELOW UPON THE FOLLOWING BASIS:
COST OF ALL MATERIAL AND LABOR, INCLUDING ALL PREMIUMS ON INSURANCE AND FRINGE BENEFITS, PLUS OVERHEAD, PROFIT AND SALES
TAX WHERE APPLICABLE. TERMS NET 15 DAYS.

☐ CONTRACT ☐ EXTRA ☒ T & M ☐ SERVICE CALL

TAKE DELIVERY OF VARIOUS COMPUTER EQUIPMENT FOR O.E.M.
AND MOVE TO SECURE AREA ON 23RD FLOOR. WORK ADDITIONAL
TO CONTRACT

12/10/98 MOVE COMPUTERS INTO P.I.U. ROOM ON O.T.

Bill L. O.E.M.

DATE AUTHORIZATION TO PROCEED PLEASE PRINT NAME

TIME AND MATERIAL WORK PURSUANT TO AND UNDER PROVISION OF ABOVE WORK ORDER.

LABOR																		
		FRI		MON		TUES		WED.		THURS.		FRI.		SAT.		SUN.		GRAND TOTAL HOURS
DATE		12/17/98		12/18		12/15		12/10/98		12/11/98								
		No. Men	Total Hrs.	No. Men	Total Hrs.	No. Men	Total Hrs.	No. Men	Total Hrs.	No. Men	Total Hrs.	No. Men	Total Hrs.	No. Men	Total Hrs.	No. Men	Total Hrs.	
FOREMAN	S/T																	
	O/T																	
SUB-FOREMAN	S/T																	
	O/T																	
JOURNEYMAN	S/T	5	5	2	2	2	2					2	2					19✓
	O/T									1	1							3 1/2✓
JOURNEYMAN	S/T	2	6	2	2													
	O/T			2	2 1/2													

MON 12/14 TUES 12/15

DATE _____

ACCEPTED: _____ NAME OF COMPANY

BY: _____ PLEASE PRINT

BY: _____ FOREMAN — PLEASE PRINT

AUTHORIZED SIGNATURE

LIST MATERIAL ON REVERSE SIDE