

JOBS REPORT FORM:
FAX TO PAINTERS' DISTRICT
COUNCIL #14 @ 312/421-7884

COMPANY: _____

1. JOB NAME: _____

LOCATION: _____

START DATE: _____

2. JOB NAME: _____

LOCATION: _____

START DATE: _____

3. JOB NAME: _____

LOCATION: _____

START DATE: _____

4. JOB NAME: _____

LOCATION: _____

START DATE: _____