湖北医药学院公共区域维修报修单

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 报修部门 |  | | | 报修时间 | | | |  | | | |
| 报修人 |  | | | 联系电话 | | | |  | | | |
| 维修内容 |  | | | | | | | | | | |
| 维修地点 |  | | | | | | | | | | |
| 时间要求 |  | | | | | | | | | | |
| 报修方式 | 电话报修 |  | 书面报告 | | |  | 应急维修 | |  | 上级安排 |  |
| 记录填写人 |  | | | | | | | | | | |
| 派工人 |  | 派工时间 | | |  | | | | | | |

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