RESOURCE LIST ENTRY

DATE:_____/_____/_____ TIME:_____:_____ AM / PM LOCATION:_____

CONTACT NAME:_____ OFFERED:____ RECEIVED:____

BUSINESS NAME:_____

ADDRESS: _____

CITY:_____ STATE:_____ ZIP:_____

HOME PHONE:(____)_____ WORK PHONE:(____)_____

FAX PHONE:(____)_____ E-MAIL:_____

DESCRIPTION OF RESOURCE: _____

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TYPE OF RESOURCE: SEARCH TEAM RESOURCE____ DONATED EQUIPMENT ____
DONATED SUPPLY____ TECHNICAL SKILLS_____ LOANED EQUIPMENT____

RESTRICTIONS: _____

_____

_____

_____

PREPARED BY:
NAME:_____ PHONE:(____)_____

Entered to Computer by: _____ DATE:_____/_____/_____ TIME:_____:_____ AM / PM

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