

MASTER LEASE WORK AUTHORIZATION

1. **TO:** Master Lease Coordinator, Bureau of Real Estate
503 North Office Building, Harrisburg, PA 17125

2. **Date**

3. **FROM:** (Department, Board or Commission)

4. **Project Number and Title:**

5. **Project Site:**

6. **Dept. Representative at Job Site:**

7. **Scope of Work:**

8. **Signature, Authorized Representative** _____

9. **Fund Commitment No./M.E. No. (To be completed and provided by Tenant Agency)**

10. SAP Information

| FUND / BUDGET PERIOD | COST CENTER | GENERAL LEDGER |
|----------------------|-------------|----------------|
| / | | |
| / | | |
| / | | |
| / | | |

Using Agency Comptroller _____

Date _____