



May 17, 2014
Project Request Form

Name of Organization or Individual: _____

Phone Number of Organization or Individual: _____

Contact Person: _____ Phone Number of Contact: _____

E-mail Address of Contact Person: _____

Project: _____

Additional Information:

Are any special skills or tools needed? (construction, artistic ability, etc)? _____

Will you be able to supply any equipment? Ladders _____ Rakes _____ Paint _____

Cleaning supplies _____ Work gloves _____ Tools (specify) _____

Other: _____

All supplies provided by your organization will be your responsibility. Please ensure that all supplies are inspected for safety and that members of your group understand proper use of the item.

**If you have any questions, please
Contact us at:
jjorgenson@mmm.com or 612-859-8770**

Please return form by May3, 2014 to Hutchinson Chamber of Commerce