

INDOOR AIR QUALITY COMMITTEE

Request for Action Form

Name:

Date:

Campus:

Phone:

Dept:

Room:

Request for Action

Please describe your indoor air quality concern briefly below. Include the room number, department or area, and any suggestions you may have for resolution of the problem.

Return Form to:

Jeff Fidlin, Indoor Air Quality Committee, Milwaukee Campus, M2, Ext. 76873, with copy to Sue Ruggles, Local 212, FH7, Ext. 76276, or Mary Musinsky, Local 587, H116E, Ext. 77851.