



Glen Oaks Manor, Statement of Work

NAME OF PROJECT	
NAME OF CONTRACTOR	
POINT OF CONTACT	
PHONE	
EMAIL	
MAILING ADDRESS	
LOCATION OF PROJECT	
SUBMITTED BY & DATE	

SCOPE OF WORK

Overview of the Project. What is the Scope of the Project?

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PROJECT DELIVERABLES

Note the tangible services and/or products within this project.

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EXCLUSIONS (What is not included in this Project)

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MILESTONES OF THE PROJECT		
DELIVERY/SERVICE DATE	TASK	SERVICES OR GOODS REQUIRED

STAKEHOLDERS	
NAME	ROLE / RESPONSIBILITY

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ESTIMATED COST OF PROJECT		
EXPENSE	DESCRIPTION	COST
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
TOTAL		\$ -

This Project cost is part of the (select one): Operating Budget Reserves

PAYMENT TERMS & CONDITIONS

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APPROVAL & COMMENTS

BOARD MEMBER/PROJECT OWNER (Print Name) SIGNATURE DATE	
BOARD OF DIRECTORS APPROVAL DATE	
PROPERTY MANAGEMENT REPRESENTATIVE (Print Name) SIGNATURE DATE	
PRESIDENT, VICE PRESIDENT OR TREASURERE GOM BOARD OF DIRECTOR (Print Name) SIGNATURE DATE	

COMMENTS