

<b>Work Request Number</b>	<b>Sub District</b>	<b>Facility Name</b>	<b>Work Description</b>	<b>Problem Type</b>	<b>Priority</b>	<b>Status</b>	<b>DFM Name</b>	<b>Contractor</b>	<b>Date</b>	<b>Amount</b>
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