

United Air Conditioning, Refrigeration, Plumbing &
Heating, Inc.
201 Ann Street #1
Newburgh, NY 12550
Phone 845-561-5030 Fax 845-561-0038

Invoice

DATE	INVOICE #
8/5/2020	424632

BILL TO	JOB SITE
CMI Management, Inc. 5285 Shawnee Rd Suite 510 Alexandria, VA 22312 Attn: Steven Miller	New York Army National Guard Recruiting 910 Raz Avenue New Windsor, NY 12553

P.O. NO.	TERMS		DUE DATE	REP	PROJECT	W.O. NO
9745	Net 30		9/4/2020		New York Ar...	
ITEM	DESCRIPTION			QTY	RATE	AMOUNT
Labor Material	Date of Service - 7-27-20 - CSS# 26324 Air Handler #4 Leaking - Please see attached Service Order for more details. Material			2.25 1	161.00 60.00	362.25 60.00

Thank you for your business.	Subtotal	\$422.25
	Sales Tax (0.00)	\$0.00
	Total	\$422.25
	Payments/Credits	\$0.00
	Balance Due	\$422.25

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: M116 Date of Visit: 7/27/20

Contractor Personnel on Site:

1. Rich Alfiesi
2. _____
3. _____
4. _____
5. _____
6. _____

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. _____
2. _____
3. _____
4. _____

Inspection, Testing, and Certification

1. _____
2. _____
3. _____
4. _____

Other Recurring Services

1. _____
2. _____
3. _____
4. _____

Service Calls – Service Call Number and Description

1. 9745. Water leaking out of unit and pans inside full of water
2. _____
3. _____

**ATTACHMENT J-0200000-05
FORMS**

Over and Above Repair Work – Order Number and Description of Work Completed

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Rich Alfieri Date: 7/27/20

Signed:

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: Jim Monagle, Contractor Date: 27 July 2020

Signed: James P. Moran

E-Mail: james.p.moragne.cfr@mail.mil