

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

SITE VISIT ON 5-3-18 (CORAOPOLIS PA.)

CSS # 12694

ASSESS DOOR REPAIRS + REPLACEMENT IN  
MAIN BUILDING + AMSA

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: CHRISTIAN MOORE / CUSTOM CONST. Date: 8-20-19

Signed: Chris Moore

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: Timothy S Peters Date: 20 AUG 2019

Signed: \_\_\_\_\_

E-Mail: timothy.s.peters3.ctr@mail.mil

**CUSTOM CONSTRUCTION**  
**CHRIS MOORE**  
**103 SWEITZER RD.**  
**ACME PA.15610**  
**(724) 244-9438**

**INVOICE CSS # 12694**

**DATE: 8/18/19**  
**DATE OF SITE VISIT : 5/20/18**

**SUBMIT TO**

JOE BAYNE  
CMI

**LOCATION**

CORAOPOLIS USARC  
CORAOPOLIS PA.

**WORK PERFORMED**

SITE VISIT TO FACILITY  
ASSESS NEEDED REPAIRS TO DOORS  
ESTIMATE LABOR COSTS  
ESTIMATE MATERIAL COSTS  
PROVIDED PROPOSAL

5.5 HRS./@ 80.00/HR.

**TOTAL DUE \$ 440.00**