

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

FACID/Building: N123 BLKS 206 Date of Visit: 7/9 8/11

Location Address: FT TOTTEN NW

Contractor Personnel on Site:
SEMMI / TOMMY

Work Performed: ADDITIONAL PREDW R 22 1208, NEEDED

Service Calls - PO/CSS#
CIS 54241 WO 87340 PO 10004-1087

Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: JOHN BORTONE Date: 8/11/23

Signed: [Signature]

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site.

Print Name/Rank: LOUIS CORBON Date: SEP 11, 2023

Signed: [Signature]

Email: LOUIS - A. CORBON - CIV @ ARMY.MIL

