

CERTIFICATION OF WORK

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

FACID/Building: NY 23 CUB 125

Date of Visit: 8/13/12

Location Address: FT TOTTEN NY

Contractor Personnel on Site:

MECH

Work Performed: REPAIR O/H DOOR TO MRP LOT

Service Calls - PO/CSS#

CSS 32291 UO 14855

Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: TOLAN WILSON

Date: 8/13/12

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 CORRO AFOS

Date: 12 SEP 2012

Signed: [Signature]

Email: LOUIS.A.CORRO-CTA@MAIL.MIL

