

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>NY23 BUD: 330</u>	Date of Visit: <u>4/1-4/3</u>
Location Address: <u>65 TOTTEN NY</u>	
Contractor Personnel on Site: <u>JSA, TETA, ED PAUL</u>	
Work Performed: <u>PAYMENT BASEMENT / RECORD CALLS</u>	
Service Calls - PO/CSS# <u>CL 32681 WO 14929</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>JOHN WOLNIE</u>	Date: <u>4/3</u>
Signed: _____	
To be signed by Facility Manager:	
I certify that the above named individuals representing the Contractor arrived on site.	
Print Name/Rank: <u>LOUIS CURRANO RFO S</u>	Date: <u>8 APR 2022</u>
Signed: _____	
Email: <u>LOUIS - 19 - CURRANO.CIV@ARMY.MIL</u>	



