

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>N123 Bldg 200</u>	Date of Visit: <u>9/4/22</u>
Location Address: <u>AT TOWEN RD</u>	
Contractor Personnel on Site: <u>TESTO, TAMEL</u>	
Work Performed: <u>REPAIR UPPER LOT GATE</u>	
Service Calls – PO/CSS# <u>CSS 81622</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>JOHN WATKINS</u>	Date: <u>9/4/22</u>
Signed: <u>[Signature]</u>	
To be signed by Facility Manager:	
I certify that the above named individuals representing the Contractor arrived on site.	
Print Name/Rank: <u>LEWIS COARSO RFO S</u>	Date: _____
Signed: <u>[Signature]</u>	
Email: <u>LEWIS.M.COARSO.CIV@army.mil</u>	

