

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>NY23 Bldg 33A</u>	Date of Visit: <u>3/17/23</u>
Location Address: <u>KT TOTALLY, NY</u>	
Contractor Personnel on Site:	
<u>Todd Clark, Franky Tomy Thomas,</u>	
Work Performed: <u>Remove tree STAND JUNG Blown down</u>	
Service Calls – PO/CS/S# <u>C11 90944 WD 2020</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>Todd Wommer</u>	Date: <u>3/17/23</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>PETER COMITO AFCS</u>	Date: <u>March 7, 2023</u>
Signed: <u>[Signature]</u>	
Email: <u>PETER.D.COMITO.CT@ARMY.MIL</u>	

