

CERTIFICATION OF WORK (To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>NY29 BURS 319</u>	Date of Visit: <u>12/22/22</u>
Location Address: <u>EF TITON</u>	
Contractor Personnel on Site: <u>Mark, Tom, Paul</u>	
Work Performed: <u>Recon walls painted (basement</u>	
Service Calls – PO/CSS# <u>CE1066 WO 20209</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>Tom Womack</u>	Date: <u>12/22/22</u>
Signed: <u>ASW</u>	
To be signed by Facility Manager: I certify that the above named individuals representing the Contractor arrived on site.	
Print Name/Rank: <u>Laura Canino R/S</u>	Date: <u>December 22, 2022</u>
Signed: <u>J. Canino</u>	
Email: <u>Laura.m.canino.civ@dcny.mil</u>	

