

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building:	<u>NYC MAIN GATE EYES</u>
Location Address:	<u>FT TOTTEN NY</u>
Date of Visit: <u>3/17/13</u>	
Contractor Personnel on Site:	
<u>TETO, JAMES LOVINS</u>	
Work Performed: <u>Remove Gate hardware & return</u>	
Service Calls - PO/CSS# <u>LSS 42714 NO 21466</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name:	<u>JOHN WILKINSON</u>
Signed:	<u>John</u>
Date:	<u>3/12/13</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>
Signed:	<u>Peter</u>
Date:	<u>MARCH 17, 2013</u>
Email:	<u>PETER.D.COMITO.CT@ARMY.MIL</u>

