

CERTIFICATION OF WORK	
[To be completed by the Contractor and saved in the Contractor's CM/MS)	
FACID/Building:	<u>NY23 BLDG 128</u>
Location Address:	<u>FT DODGE NY</u>
Date of Visit: <u>3/16/13</u>	
Contractor Personnel on Site:	
<u>FRANK, Paul</u>	
Work Performed: <u>Install Sea Room Closets</u>	
Service Calls - POCSST# <u>6358448 NO 21483</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name:	<u>John Wallace</u>
Signed:	<u>John</u>
Date: <u>3/16/13</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 D. LAMITTA, DPM</u>
Signed:	<u>Peter D. Lamitta</u>
Date: <u>MARCH 16, 2013</u>	
Email:	<u>PETER.D.LAMITTA.CTR.GARREY.MIL</u>

Womans Mens

