

CERTIFICATION OF WORK

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building:

NY23 0603 129

Date of Visit:

3/30/22

Location Address:

KT TOTTEN M

Contractor Personnel on Site:

FRANK

Work Performed: REPAIR IN TOWER 2nd Floor CLOTHLINE

Service Calls – PO/CSS#

CS 92861 WO 21251

Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: PETER COMITO

Date: 4/4/23

Signed: Peter

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site.

Print Name/Rank: PETER COMITO PFC AS Date: APRIL 4, 2023

Signed: Peter

Email: PETER.D.COMITO.CTR@ARMY.MIL

