

CERTIFICATION OF WORK (To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>MPV3 Bldg 330A</u>	Date of Visit: <u>5/1/23</u>
Location Address: <u>ATTENTION</u>	
Contractor Personnel on Site: <u>MANNA</u>	
Work Performed: <u>REPAIR URINAL, DRAIN PROBLEM IN PLUMB</u>	
Service Calls -- PO/CSS# <u>CF592086 NOZ1785 PO 12004-1008</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>JOHN WOLFE</u>	Date: <u>5/1/23</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 CAMITO AFAS</u>	Date: <u>MAY 4, 2023</u>
Signed: <u>[Signature]</u>	
Email: <u>PETER.D.CAMITO.CTR@ARMY.MIL</u>	

