

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building:	<u>NY13 Polar 200</u>
Location Address:	<u>ET TOTEN NY</u>
Contractor Personnel on Site:	<u>TITO Paul</u>
Work Performed:	<u>REPAIR Holes In Arms room walls</u>
Service Calls – PO/CSS#	<u>CSC 9L386 WD 22125 Po 10004-102</u>
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name:	<u>John Wolmer</u>
Signed:	<u>JKW</u>
Date: <u>5/17/23</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 AFOS</u>
Signed:	<u>PC</u>
Date: <u>May 17, 2022</u>	
Email: <u>PETER.D.COMITO.GRODERRY.MIL</u>	

