

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>NY23 Bldg 206</u>	Date of Visit: <u>2 June 23</u>
Location Address: <u>FT TOTTEN NY</u>	
Contractor Personnel on Site:	
<u>FRANCIS THOMAS</u>	
Work Performed: <u>REPAIR SHOWER DRAINS 1ST FLOOR LATRINE</u>	
Service Calls – PO/CSS# <u>CS 193804 WO 22129 PO 10004-104</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>FRANCIS THOMAS</u>	Date: <u>2 June 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>LOUIS CORBIS</u>	Date: <u>June 5, 2023</u>
Signed: <u>[Signature]</u>	
Email: <u>Louis.A.Corbis@navy.mil</u>	

