

CERTIFICATION OF WORK	
(To be completed by the Contractor and saved in the Contractor's CMMS)	
FACID/Building: <u>NY23 0104 206</u>	Date of Visit: <u>7/10/23</u>
Location Address: <u>ET TOTKA</u>	
Contractor Personnel on Site:	
<u>Jeremy TOM</u>	
Work Performed: <u>PSAS NO A/C 3rd floor</u>	
Service Calls – PO/CSS#	
<u>CCS 92421 WD 27340 PO/0004-1956</u>	
Please take pictures and send with quote	
CERTIFICATION OF WORK	
To be signed by the Contractor:	
Print Name: <u>JOHN WELKELIN</u>	Date: <u>7/10/23</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 CORBON</u>	Date: <u>Jul 1, 10/2023</u>
Signed: <u>[Signature]</u>	
Email: <u>Louis.A.Corbom-CIV@Army.mil</u>	

