

# CERTIFICATION OF WORK

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

FACID/Building: NYSB MAIN GATE

Date of Visit: 10/14/12

Location Address: NEW USAK

Contractor Personnel on Site:

JACK

Work Performed: ADJSTRO & LUBRICATING REAR GATE

Service Calls - PO/CSS#

CSS 90081 W0 1937

Please take pictures and send with quote

## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: TOHAN WOLFE

Date: 10/14/12

Signed: [Signature]

To be signed by Facility Manager:

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

Print Name/Rank: LOUIS CORMANO RFO S Date: OCTOBER 14 2012

Signed: [Signature]

Email: LOUIS.CORMANO.CIV@ARMY.MIL



