

EMTech dba / Energy Management Technologies, LLC
 5 Hemlock Street
 Latham, NY 12110
 Phone # (518) 783-7810

Invoice

Date	Invoice #
9/14/2021	6647

Bill To

CMI Management, Inc.
 PM / 99th - Region 2
 5285 Shawnee Road Suite #510
 Alexandria, VA 22312

Project	P.O. No.	Terms		Due on receipt	
19801 Army Reserve T & M by Location	CSS# 31088	Due Date		9/14/2021	
Description		Qty	Rate	Serviced	Amount
Dave Ogden - Saugerties Location CSS# 31088 VAV's: 106, 112, 121, 128 reheat valve actuators are all broken and need to be replaced. Mechanical HVAC discounted 5% southern county service contract labor rate.		2.5	124.00	7/28/2021	310.00T
1 Trip (S) Mileage , Vehicle, Delivery, Charges		110	1.40		154.00T
SALES TAX: <i>If deducting sales tax from invoice, please include your tax exempt certificate with payment.</i>					
For Assistance or Questions Please Contact Office Phone: (518) 783-7810 Extension 113 Service Dept. (518) 631-6004 Fax (518) 783-2079					
Thank you for your business!					
Subtotal \$464.00					
Sales Tax (8.0%) \$37.12					
Total \$501.12					
Payments / Credits \$0.00					
Balance Due \$501.12					



Energy Management Technologies, LLC
Service 518-631-6004 Main 518-783-7810 Fax 518-783-2079

6647

FIELD REPORT

Location Name / Address <i>CMI Sangatios Army</i>		Bill To	Date <i>6/15/21</i>																																																	
Contact / Phone <i>CS#31088</i>		Service Contract #	Installed Contract #																																																	
		Technician Code <input type="checkbox"/> Contract <input checked="" type="checkbox"/> F & M <input type="checkbox"/> Quoted <input type="checkbox"/> Warranty <input type="checkbox"/> Sales Support <input type="checkbox"/> Material Sale Only																																																		
Problem Description:																																																				
JOB SITE SAFETY CHECKLIST <input type="checkbox"/> Electrical Shock Hazards <input type="checkbox"/> Confined Space <input type="checkbox"/> Inadequate Ventilation <input type="checkbox"/> Water/Oil/Other Liquids on Floor <input type="checkbox"/> Trip or Fall Hazards <input type="checkbox"/> Fire or Explosive Hazards <input type="checkbox"/> Site Checked		WORK PERFORMED <i>VAV #s 106, 112, 121, 128 reflect valve actuators broken + need to be replaced ALL 4 are TAC ERIE AP33A000 Erie pop top modulating NSR Actuator</i>																																																		
REFRIGERANT ACTIVITY Did Refrigerant Activity occur? <input type="checkbox"/> Yes If yes, a Refrigerant Activity <input type="checkbox"/> No Report Must be completed																																																				
SERVICE EXPENSE PARTS, MATERIAL SOURCE <input type="checkbox"/> CS Customer Supplied <input type="checkbox"/> PC Procurement/Cash <input type="checkbox"/> TS Truck <input type="checkbox"/> TP EMTech Parts <input type="checkbox"/> VP Vendor Purchase		PARTS and MATERIAL <table border="1"> <thead> <tr> <th>Source</th> <th>Qty</th> <th>Part #</th> <th>Description</th> <th>PO #</th> </tr> </thead> <tbody> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>		Source	Qty	Part #	Description	PO #																																												
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EXPENSE TYPE (CHECK ALL THAT APPLY) <input type="checkbox"/> Sm Recovery Sys <input type="checkbox"/> Lg Recovery Sys <input type="checkbox"/> Vacuum Pump <input type="checkbox"/> Welder <input type="checkbox"/> Tube Brush Unit <input type="checkbox"/> Technology Charge <input type="checkbox"/> Fuel Charge <input type="checkbox"/> Environment Fee <input type="checkbox"/> Trip Charge <input type="checkbox"/> Pressure Washer <input checked="" type="checkbox"/> Mileage <input type="checkbox"/> Misc. Supplies		LABOR <table border="1"> <thead> <tr> <th>Date</th> <th>Name</th> <th>DDC (Tech)</th> <th>MS (Mech)</th> <th>Reg/Other Time</th> <th>Over Time</th> <th>Double Time</th> </tr> </thead> <tbody> <tr><td><i>6/15/21</i></td><td><i>Daniel Ogden</i></td><td></td><td></td><td><i>X</i></td><td><i>2 1/2</i></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>		Date	Name	DDC (Tech)	MS (Mech)	Reg/Other Time	Over Time	Double Time	<i>6/15/21</i>	<i>Daniel Ogden</i>			<i>X</i>	<i>2 1/2</i>																																				
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Follow-up Required? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe																																																				
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White - EMTech		Yellow - Processing		Pink - Customer																																																

Follow-up Required? Yes No Describe

Customer Signature

Services described were performed as part of the terms of this document.