



invoiice

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ROOFING & SHEET METAL COMPANY

P.O. BOX 1231, CHARLESTON, WV 25324 • TELEPHONE (304) 755-8135 • FAX: (304) 755-5275 WV CONTRACTORS LICENSE NO. WV000104
EMAIL: charleston@tri-stateservice.com • WEBSITE ADDRESS: www.tri-stateservicegroup.com

SOLD TO: CMI MANAGEMENT
ATTN: AP
5385 SHAWNEE RD, STE 510

SHIP TO: US ARMY RESERVE
OMS SHOP
748 N. JEFFERSON ST

ALEXANDRIA, VA 22312

LEWISBURG, WV

	PURCHASE ORDER NO.	SHIP VIA	SHIP DATE	TERMS
	17977			NET 30 DAYS

Job # 816399 US ARMY RESERVE OMS SHOP

PERFORM ROOF REPAIRS PER ATTACHED WORK ORDER.

This billing includes all costs and markups to perform the work as described including labor, material, taxes, supervision, insurance, tools and equipment, shop and warehouse expenses, vehicular cost, record keeping, dump charges and environmental compliance.

A 4.5% CREDIT CARD FEE WILL BE CHARGED FOR ALL CREDIT CARD PAYMENTS.

WE APPRECIATE YOUR BUSINESS!

SALE AMOUNT	393.71
MISC. CHARGES	
SALES TAX	27.56
FREIGHT	
TOTAL	421.27

TRI-STATE ROOFING & SHEET METAL COMPANY

P.O. Box 1231 Charleston, WV 25324 | (304) 755-8135, FAX (304) 755-5275 | Contractor Lic. # WY000104 | Website: www.tri-stateservicegroup.com

DATE 1-30-25

RECEIVED ROOFING WORK ORDER

FEB 07 2025

JOB # 816399



I CUSTOMER CMI
 N MFG JOB #
 V PO # 17977
 O ADDRESS
 C CITY / STATE
 E PHONE 703-738-5302
 T CONTACT Reginald Cook
 O CALL FOR APPT: No Yes

BLDG NAME U.S. Army Reserve
 W ROOF AREA(S) CMS Shop
 O ADDRESS 148 N. Jefferson St
 R CITY/STATE Lewisburg WV
 K CONTACT
 A PHONE # (SITE)
 T PHONE # (CELL)
 Emergency Response?

ROOF TYPE	<input type="checkbox"/> EPDM <input type="checkbox"/> BUR	<input type="checkbox"/> PVC <input type="checkbox"/> MOD-BIT:	<input type="checkbox"/> TPO: <input type="checkbox"/> Gravel	<input type="checkbox"/> Adhered <input type="checkbox"/> Smooth	<input type="checkbox"/> Ballast <input type="checkbox"/> Granulated	<input type="checkbox"/> M.A.S. <input type="checkbox"/> SHINGLE	<input type="checkbox"/> METAL: <input type="checkbox"/> SLATE	<input type="checkbox"/> S.S. <input type="checkbox"/> TILE	<input type="checkbox"/> Lap
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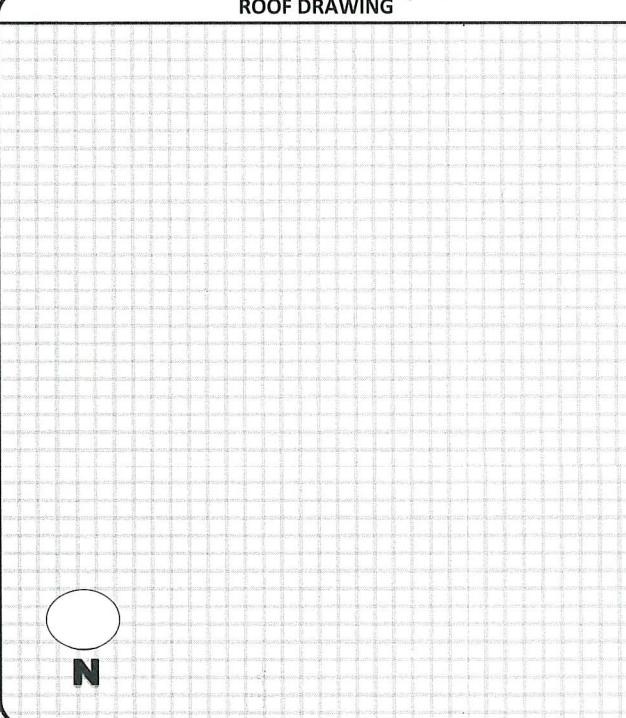
Customer Description of Problem:

Shingles are lifting, some are missing and need replaced

ROOF DRAWING

Roof Service

- Drains
- Inspected
- Cleaned
- Gutter
- Inspected
- Cleaned
- Downspout
- Inspected
- Cleaned
- Field
- Perimeter
- Edge metal
- Coping
- Flashing
- Wall
- Curb
- Cntr Flash
- Wall
- Curb
- Ceiling Tile



DESCRIPTION OF REPAIRS/WORK PERFORMED

Replaced missing shingles
Inspected all
Drains and downspouts and
gutters
Found no issues on EPDM
roof

QTY	MATERIAL DESCRIPTION	QTY	MATERIAL DESCRIPTION	QTY	MATERIAL DESCRIPTION
1 lb	1 1/2" Roofing nails	✓			
1	Tube G.P. Sealant	✓			

SERVICE TECHNICIAN

Steve Facemyer

WEATHER

O

TEMP

50°

START DATE

2-3-25

FINISH DATE

2-3-25

WEATHER CODE: Sunny (S) Rain (R) Snow (SN) WINDY (W) OVERCAST (O) DRIZZLE (D) ICE (I)

TECH RECOMMENDATIONS: _____

- Billable T & M
- Work in Progress
- Manufacturer's Wty.
- Complete
- Tri-State Wty.

Customer Signature

Tri-State Roofing & Sheet Metal will make repairs to localized areas that appear to be the source of leaks and will make a good faith effort to locate and try to stop leaks. Tri-State Roofing & Sheet Metal does not warrant that further leaks will not occur. Depending upon the condition, age and type of roof, future leaks may well be expected. Tri-State Roofing & Sheet Metal is not responsible for indoor air quality, interior or consequential damages, including mold, mildew, loss of use, damage to personal property, personal injury or claims from building occupants.

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

FacID/Building: _____ Date of Visit: _____

Contractor Personnel on Site:

1. _____ 2. _____

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. Replaced missing Shingles Inspected gutter
Drains and Downspouts

Service Calls – Service Call Number and Description

1. CSS# / WO# 17977
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Steve Facymyer Date: 2-3-25

Signed: Steve Facymyer

To be signed by Facility Manager:

By signing the Certification of Work, I certify that the above-named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed.
This is NOT a Certification that the Work was performed correctly – The COW simply verifies that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: D. Trout Date: _____

Signed: D. Trout

E-Mail: _____