

CUSTOMER SATISFACTION CERTIFICATE



PAINTING • ROOFING • WINDOWS

7 7 7 - 1 2 3 4

STATE LICENSE NO. 245291

This form is presented to you so that we can insure the work on your building has been completed. Please check the appropriate blocks below:

The work completed is: Excellent Satisfactory Passable

Type of work performed by Armstrong:

- PAINTING
- ROOFING
- WINDOWS
- CARPENTRY
- VINYL SIDING
- GUTTERS AND/OR
- DOWNSPOUTS
- OTHERS (please list) _____

Comments and Suggestions: Wonderful Crew!
Great attention to detail.
Very pleased with the project.

Can we use your name as a reference? yes no

Can we use a picture of your house without an address as a reference? yes no

Can we use your address as a reference? yes no

Date: 8/30/10

Name: CHRISTINE M. ELDON

Address: 3323 OAKWOLL DR

City: EMERALD HILLS, CA 94062

Installer (if name known): JOSE

Customer Signature: Christine Eldon