

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: Excellent work

done by all employees -
would do business with your
company again -

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: August 5, 2010

Name: Pascal Castro

Address: 334 Mississippi St.

City: San Francisco, CA 94107

Installer (if name known): Dery

Customer Signature: Pascal Castro