

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

FacID/Building: P1051-07 Date of Visit: 12/12/18

Contractor Personnel on Site:

1. <u>Tony Lazzari</u>	4. <u>Scott W.</u>
2. <u>Frank Siperis</u>	5. _____
3. <u>Jim Beeton</u>	6. _____

Work Performed:

Other Recurring Services

1. <u>6474</u>
2. _____
3. _____
4. _____

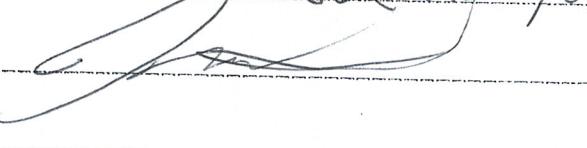
**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: John Greenhans Date: 12-12-18  
Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: SSG JOE WOJKO Date: 12 Dec 2018  
Signed:   
E-Mail: \_\_\_\_\_