

CERTIFICATION OF WORK

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

FACID/Building: WV010 Date of Visit: 03-13-18

Contractor Personnel on Site:

1. Ray Ryczek
2. Andrew Butcher

Work Performed:

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

1. WO# _____

Service Calls - Service Call Number and Description

1. CSS# 12282
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ray Ryczek Date: 03-13-18
Signed: Ray Ryczek

To be signed by Facility Manager:

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:

Print Name/Rank: Christopher Flaughner / 1LT Date: 13 MAR 18
Signed: Chris Flaughner
E-Mail: christopher.j.flaugher.mil@mail.mil