

CERTIFICATION OF WORK

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

FACID/Building: WV1022 Date of Visit: 3-12-18

Contractor Personnel on Site:

1. Ray Ryczek 2. _____
CASTO TECHNICAL

Work Performed:

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

1. WO# _____

Service Calls - Service Call Number and Description

1. CSS# 12420
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Ray Ryczek Date: 3-12-18
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: Ruth Gaither GS9 Date: 12 Mar 2018

Signed: Ruth Gaither

E-Mail: ruth.a.gaither.civ@mail.mil