

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: WV022

Date of Visit: 11-14-2024

Contractor Personnel on Site:

1. Matthew Wright
2. _____
3. _____
4. _____
5. _____
6. _____

Service Call Number

CSS# 98882 WO# 16630

Description of Repairs

Replaced Light over Gym door

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Matthew Wright Date: 11-14-2024

Signed: MMW

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: Andrew Rodpheaver Date: 14 Oct 24

Signed: AR

E-Mail: _____

