

OVER AND ABOVE CERTIFICATION OF WORK

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

ACID/Building: WV053

Date of Visit: 12-4-18

Contractor Personnel on Site:

1. Ken Kasper

4. _____

2. _____

5. _____

Work Performed: Attic not working.

Over and Above Work – Order Number and Description of Work Completed

CSS# 15720 WO# 3907

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Kyle Kasper Date: 12-4-18

Signed: Kyle Kasper

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: Donald L. Shawalter Date: 4 Dec 18

Typed:

CLB

Mail:

Donald.L.Shawalter4.civ@mail.mil