

CERTIFICATION OF WORK
SERVICE CALL

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

FACID/Building: 10021 Date of Visit: 5-17-22

Contractor Personnel on Site:

1. OSCAR MENDEZ
2. _____
3. _____
4. _____
5. _____
6. _____

Service Call Number

CSS# 370 WO# 17339

Description of Repairs

Replace toilet paper holder on women's restroom

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: OSCAR MENDEZ Date: 5-18-22

Signed: [Signature]

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: AUSTIN OKORN /CPT Date: 17 MAY 2022

Signed: Austin Okorn

E-Mail: AUSTIN.OKORN.MICROARMY.MIL