

*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 time line:

CERTIFICATION OF WORK

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

Building: WV029-01 _____ Date of Visit: 19AUG19

Contractor Personnel on Site:

1. GEORGE E. GRANT 2. _____

Work Performed:

Preventive Maintenance - (Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders -

| PM/SO | WO # | Asset # | PM # | Asset Description |
|-------|-------|---------|------------|---|
| | 10195 | 3051 | FQ-3051 | J-1502000-04 1-pc Air Handler Quarterly Filter PM |
| | 10195 | 3052 | FQ-3051 | J-1502000-04 1-pc Air Handler Quarterly Filter PM |
| | 10390 | 7563 | PM-MO-7563 | J-1502000-49 Manual Gate |
| | 10417 | 6818 | PM-QT-6818 | J-1502000-23 1- pc Ice Maker Machine Annual Filter PM |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: GEORGE E. GRANT Date: 19AUG19
Signed: George E. Grant

To be signed by Facility Manager:

Print Name/Rank: Charles L. Dinkins Date: 20190819
Signed: Charles L. Dinkins

E-Mail: _____