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

FACID/Building: VA 011 Date of Visit: 3-25-19

Contractor Personnel on Site:

1. Brian Schamp 2. _____

Work Performed:

Service Call:

1. WO# 5-6859 ✓

Service Calls – Service Call Number and Description

1. CSS# 16707 ✓
2. CSS# _____
3. CSS# _____

Please take pictures

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Schamp Date: 3-25-19

Signed: Brian Schamp

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: K. P AUGUSTIN Date: 9MAY2019

Signed: _____

E-Mail: Kenneth.P.Augustin.mil@MAIL.MIL