

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: MD003 Date of Visit: 3/6/19

Contractor Personnel on Site:

1. John Brown
2. _____
3. _____
4. _____
5. _____
6. _____

Service Call Number

CSS# 13678 WO# 6845

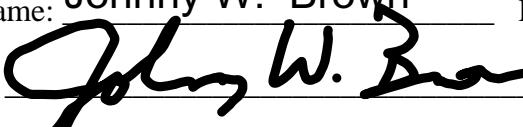
Description of Repairs

Replaced base in 4 office areas

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W. Brown Date: 3/6/19

Signed: 

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: Roderick Daniels Date: 3/6/19

Signed: 

E-Mail: _____

