

CERTIFICATION OF WORK

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

FACID/Building: MOOR9 Date of Visit: 7/31, 8/1 - 8/5

Contractor Personnel on Site:

1. Brian Davis
2. Bruce Oliver
3. _____
4. _____
5. _____
6. _____

Service Calls - Service Call Number and Description

1. Circuit #1 Repair to Chiller
2. _____
3. _____

WO# 9631 CSS: 15569

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Brian Davis Date: 8/5/19

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:

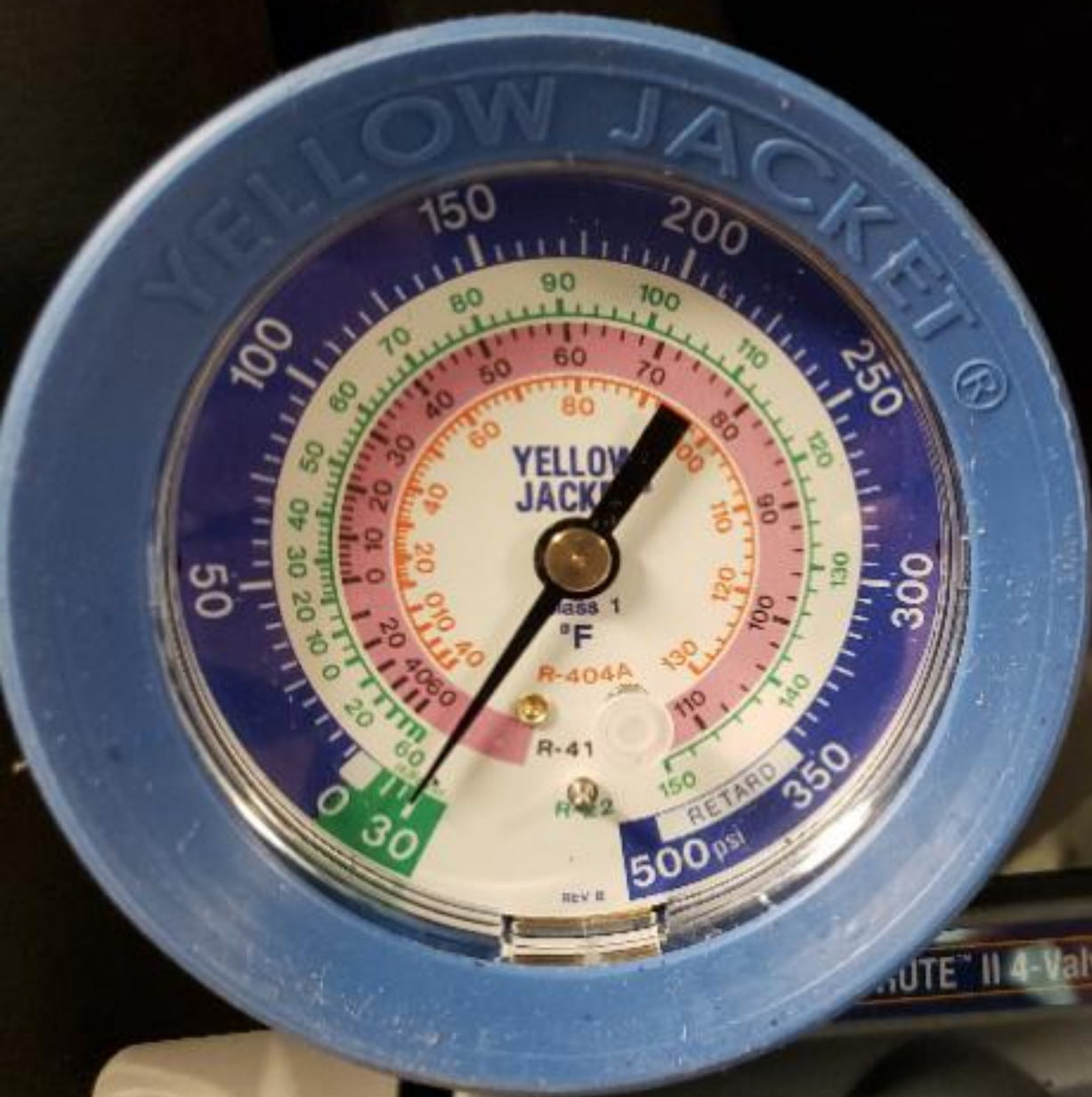
Print Name/Rank: SFC WILLOUGHBY, RYAN Date: 05 AUG 2019

Signed: [Signature]

E-Mail: ryan.m.willoughby3.mil@msil.mil







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