

SERVICE CALL CERTIFICATION OF WORK

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

FACID/Building: MD005

Date of Visit: 3-8-2019

Contractor Personnel on Site:

- | | |
|---------------------------|----------|
| 1. <u>Mike Contreras</u> | 4. _____ |
| 2. <u>Miguel Guerrero</u> | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

Service Calls – Service Call Number and Description

1. CSS# 16510 WO# 6457
2. Description of repairs :

Reset post with concrete
adjust door opening closing

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Gilberto Contreras Date: 3-8-2019

Signed: [Signature]

To be signed by Facility Manager or Government Official

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: Jason Gavin, AFOS Date: 1-April-2019

Signed: Jason D. Gavin

E-Mail: jason.d.gavin.ctr@mail.mil

