

SERVICE CALL CERTIFICATION OF WORK

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

FACID/Building: MD002 Date of Visit: 4-2-19

Contractor Personnel on Site:

- | | |
|--------------------|----------|
| 1. <u>Sam Kutz</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Work Performed:

Service Calls - Service Call Number and Description

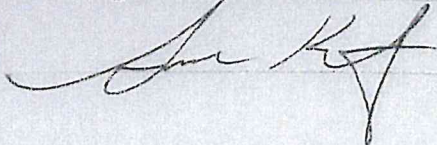
1. CSS# 18174 WO# 8250 MD002
2. Description of repairs :

Reinstalled corner fence post & secured
with screws. Reworked all barbed wire and
tightened all loose hardware

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Sam Kutz Date: 4-2-19

Signed: 

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: _____ Date: _____

Signed: _____

E-Mail: _____

