

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: MD002

Date of Visit: 2/27/2019

Contractor Personnel on Site:

- | | |
|----------------------|-----------------------|
| 1. <u>Gary Penn</u> | 4. <u>José Flores</u> |
| 2. <u>David Hall</u> | 5. <u>Josh Booth</u> |
| 3. <u>John Booth</u> | 6. _____ |

Service Call Number

CSS# 19330

WO# 9000

Description of Repairs

Remove and Replace Shingles (Approx 800 sq feet)
Install New Underlayment and Ice + Water,

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Joshua Booth Date: 9/5/2019

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: Brian Wharton GSN Date: Sept 5 2019

Signed: [Signature]

E-Mail: Brian.w.wharton.civ@mail.mil



UNITED STATES AIR
RESERVE CENTER

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