

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: _____ Date of Visit: 10/31/19

Contractor Personnel on Site:

- | | |
|-----------------------------|----------|
| 1. <u>Don Huson</u> | 4. _____ |
| 2. <u>Shantel Roundtree</u> | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 19394 WO# 9005

Description of Repairs

Change Ballast on 2 lights on second
Floor Hallway

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Rodney Hancock Date: 10/31/19

Signed: Rodney Hancock

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: Shantel Roundtree, SFC Date: 20191031

Signed: [Signature]

E-Mail: Shantel.L.Roundtree.mil@mail.mil



EXIT

214
CLASSROOM

212
CLASSROOM



EXIT

214

212