

MOORE

CERTIFICATION OF WORK

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

FACID/Building: MD 002

Date of Visit: 11/13/19

Contractor Personnel on Site:

1. Doug Moore
2. Joe Moore
3. Shawn P.

4. _____
5. _____
6. _____

Service Calls – Service Call Number and Description

1. WO# 11098, CSS# 21792 - No power to OMS Building
2. _____
3. _____

WO# _____ CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Doug Moore Date: 11/13/19

Signed: Doug Moore

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 W. Hunter / GS-11 Date: 11/13/19

Signed: Brian W. Hunter

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

CP

PNL RP3

y2

BATTERY CHARGERS

CAGE LIGHTS

