

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

FACID/Building: MD 019 Date of Visit: 6-24-20

Contractor Personnel on Site:

1. Joe Moore
2. Shawn Palmer
3. _____
4. _____
5. _____
6. _____

Service Calls – Service Call Number and Description

1. repair fence / barbed wire w.o. 11451 ccs # 22761
2. _____
3. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Joseph Moore Date: 6/24/20

Signed: Joseph 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: 1LT Margaret Carnegie Date: 6/24/20

Signed: Margaret Carnegie

E-Mail: margaret.i.carnegie.mil@mail.mil







