

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

FACID/Building: VA-050 Date of Visit: 1-8-21

Contractor Personnel on Site:

1. <u>Keith Pearson</u>	4. _____
2. <u>Chris Denike</u>	5. _____
3. _____	6. _____

Service Calls – Service Call Number and Description

1. <u>EST- 1687</u>
2. <u>CSS- 24240</u>
3. <u>WO- 11954</u>

Replaced non-functional DUR with new
Programmed, tested, demonstrated
cleaned, adjusted & re-focused cameras

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Keith Pearson Date: 1-8-21

Signed: Keith Pearson

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: CPT T Friend Date: 1-8-21

Signed: M. Friend

E-Mail: thessalonica.m.friend.mil@mail.mil





