

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

FACID/Building: MD002

Date of Visit: JUNE 26, 2020

Contractor Personnel on Site:

1. <u>CHRIS</u>	4. _____
2. _____	5. _____
3. _____	6. _____

Service Calls – Service Call Number and Description

1. URINAL IN BLDG 002 CONSTANT CLOGS/OVERFLOWS
2. _____
3. _____

WO# 12450 CSS# 25531

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: CHRIS TROTTER Date: 6/26/20

Signed: Chris Trotter

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. Linton / GS11 Date: 7-200626

Signed: Brian W. Linton

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



