

## **CERTIFICATION OF WORK SERVICE CALL**

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

FACID/Building: MD002 B-7 Date of Visit: 05/05/21

#### Contractor Personnel on Site:

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

## Service Call Number

CSS# 25875 WO# 13990

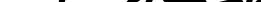
## Description of Repairs

I replaced 3 flush-o-meter diaphragms with 1 gallon diaphragm

## CERTIFICATION OF WORK

To be signed by the Contractor:

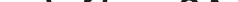
Print Name: Johnny W Brown Date: 05/05/21

Signed: 

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: SFC Jason Lamontagne Date: 05/05/21

Signed: 

Signed: 

Signed: 

E-Mail: [\[REDACTED\]](mailto:)

