

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

FACID/Building: MD019 Date of Visit: 7/1/2021

Contractor Personnel on Site:

- | | |
|-----------------------|----------|
| 1. <u>Brian Davis</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

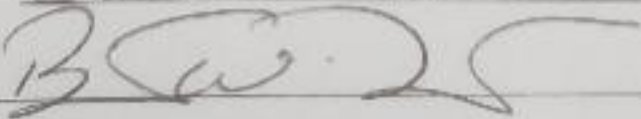
Service Calls – Service Call Number and Description

1. A/C in drill Hall freezing - Charges set point
2. From 0° to 72°
3. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

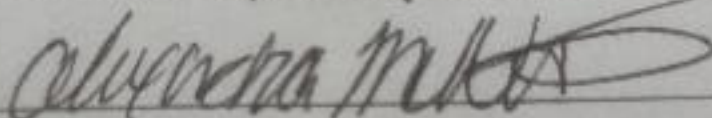
Print Name: BRIAN DAVIS Date: 7/1/2021

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 contractor was on-site during the identified timeline:

Print Name/Rank: SGT Alexandra McNicholas Date: 20210701

Signed: 

E-Mail: Alexandra.g.mcnicolas.mil@army.mil

