

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

FACID/Building: MDO19

Date of Visit: 4/14/22

Contractor Personnel on Site:

1. Josh Stephenson
2. Bruce Oliver
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**Service Calls – Service Call Number and Description**

1. Boiler drain filters → Separate
2. Separate Recirculator Vents
3. \_\_\_\_\_

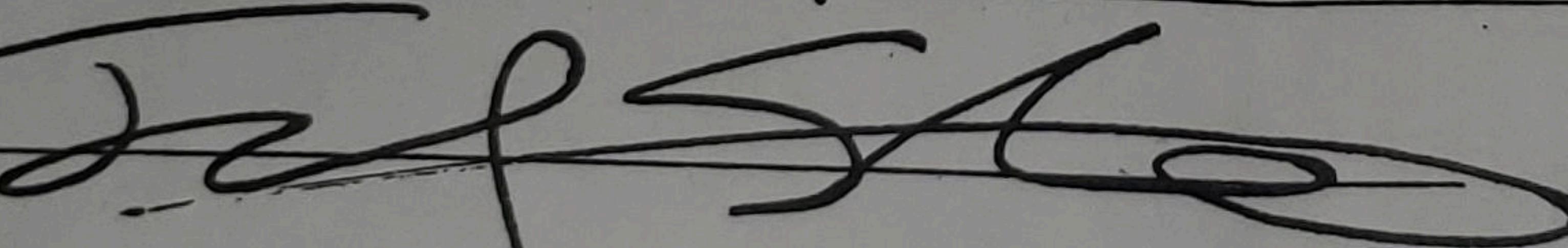
W/o # 15971  
CS# 34091

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Josh Stephenson

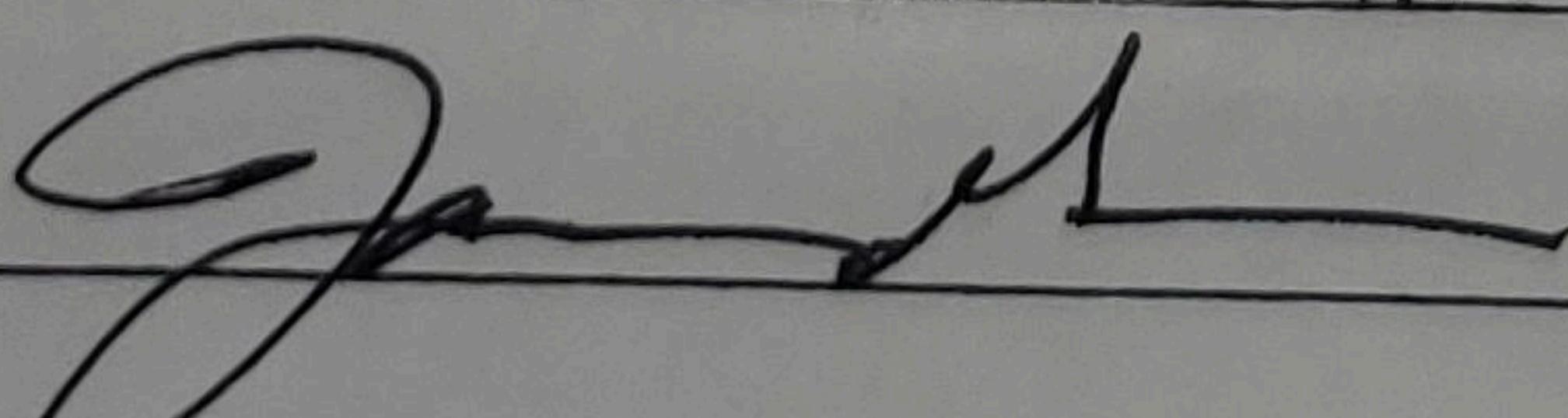
Date: 4/14/22

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: Jason Garin Date: 4/14/22

Signed: 

E-Mail: \_\_\_\_\_





