

**CERTIFICATION OF WORK  
SERVICE CALL**

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

FACID/Building: VA050 Date of Visit: 7.24.2020

Contractor Personnel on Site:

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

**Service Call Number**

CSS# \_\_\_\_\_ WO# 12577

**Description of Repairs**

Found no leaks on either sink. No dripping water  
Sink faucet drips only when not turned off back to center  
Explained, to ensure faucet doesn't drip, turn  
all the way off

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

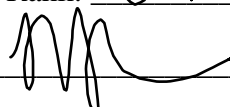
Print Name: Richard Walker Date: 7.24.2020

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: CPT Thessolonia Date: 7.24.2020

Signed:  Ennd

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

