

CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: MD002 B-1 Date of Visit: 3/8/19

Contractor Personnel on Site:

1. John Brown 4. _____
2. _____ 5. _____
3. _____ 6. _____

Service Call Number

CSS# 17506 wo# 7950

Description of Repairs

I replaced 5 bulbs and 3 ballasts

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Johnny W. Brown Date: _____

Signed: Johnny W. Brown

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 Phillip Cannon Date: 3/8/19

Signed 
E-Mail 

E-Mail: _____



