

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:

**CERTIFICATION OF WORK**

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

FACID/Building: NY023-200 \_\_\_\_\_ Date of Visit: 1/9/20

Contractor Personnel on Site:

1. Deen Lowe \_\_\_\_\_ 2. \_\_\_\_\_

**Work Performed:**

**Preventive Maintenance** - (Annual, Quarterly, Monthly, equipment identification, etc.)  
**Service Orders** -

PM/SO	WO #	Asset #	PM #	Asset Description
	6641	9449		J-24 1-pc Beverage Dispenser, Cold, Electric
	6642	9450		J-24 1-pc Beverage Dispenser, Cold, Electric
	6643	9451		J-24 1-pc Microwave, Electric
	6644	9452		J-24 1-pc Serving Counter, Cold Food Table, Electric
	6645	9453		J-24 1-pc Serving Counter, BEVERAGE
	6646	9454		J-24 1-pc Coffee Maker
	6647	9456		J-24 2-pc Range, Standard Oven, Electric
	6648	9457		J-24 1-pc Serving Counter, Hot Food Table
	6649	9458		J-24 1-pc Meat Slicer
	6650	9459		J-24 1-pc Coffee Maker
	6651	9460		J-24 1-pc Meat Slicer
	6652	9461		J-24 1-pc Tilting Skillet/ Braising Pan
	6653	9462		J-24 1-pc Meat Slicer
	6654	9463		J-24 1-pc Can Opener
	6655	9464		J-24 1-pc Food Mixer

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### CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: DEENVAUGHN ROWE Date: 1/9/20

Signed: 

To be signed by Facility Manager:

Print Name/Rank: Louis Corrao AFOS Date: 1/24/20

Signed: 

E-Mail: Louis.A.Corrao-CFR@mac.com