

CERTIFICATION OF WORK

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

FACID/Building: Fort Totten Bld 206 Date of Visit: 8-15-22

Contractor Personnel on Site:

- | | |
|-----------------------------|----------|
| 1. <u>Keith Pearson</u> | 4. _____ |
| 2. <u>Austin Carmichael</u> | 5. _____ |
| 3. _____ | 6. _____ |

Service Calls – Service Call Number and Description

- | |
|----------------------|
| 1. <u>CSS - 1825</u> |
| 2. <u>WO - 18686</u> |
| 3. <u>EST - 2051</u> |

Replaced All Readers For Bld 206

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Keith Pearson Date: 8-15-22

Signed: [Signature]

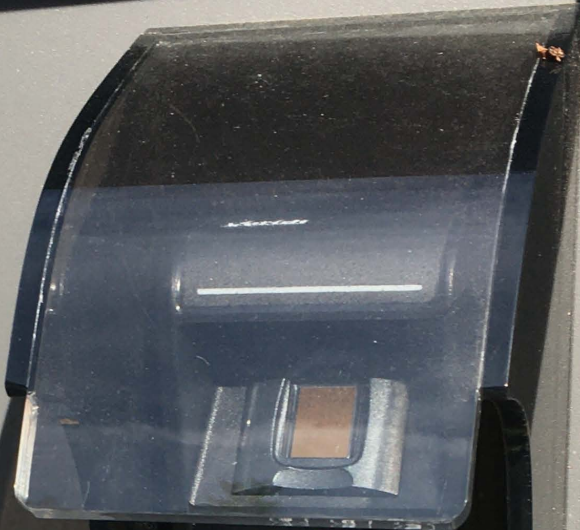
To be signed by Facility Manager:

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: _____ Date: 8-15-22

Signed: [Signature]

E-Mail: PETER@NNKDESIGN.COM



PLACE FINGER

ENTER	PLACE CARD	NO ENTRY
1	2	3
4	5	6
7	8	9
*	0	#

INSERT CARD

PLACE FINGER

ENTER	PLACE CARD	NO ENTRY
1	2	3
4	5	6
7	8	9
*	0	#

INSERT CARD





