

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

FACID/Building: NY003 Bldg 12 Date of Visit: 10/08/18 11/6/19

Contractor Personnel on Site:

1. Tr

2. DAN WESSE

Work Performed:

Preventive Maintenance - (Annual, Quarterly, Monthly, equipment identification, etc.)
Service Orders - CSST 20967 WO 5597

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: John Wayne

Signed:

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: Louis Corso AFOS Date: 11/6/19

Signed: Louis Corso

E-Mail: Louis.A.CORSO.CTR@mail.mil

