

ATTACHMENT J-0200000-05
FORMS

Over and Above Repair Work – Order Number and Description of Work Completed

CSS# 21020, WO# 5600

Supply And Install 2 Automatic Flush Bolts

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Craig Wessel Date: 10/9/19
Signed: Craig W

To be signed by Facility Manager:

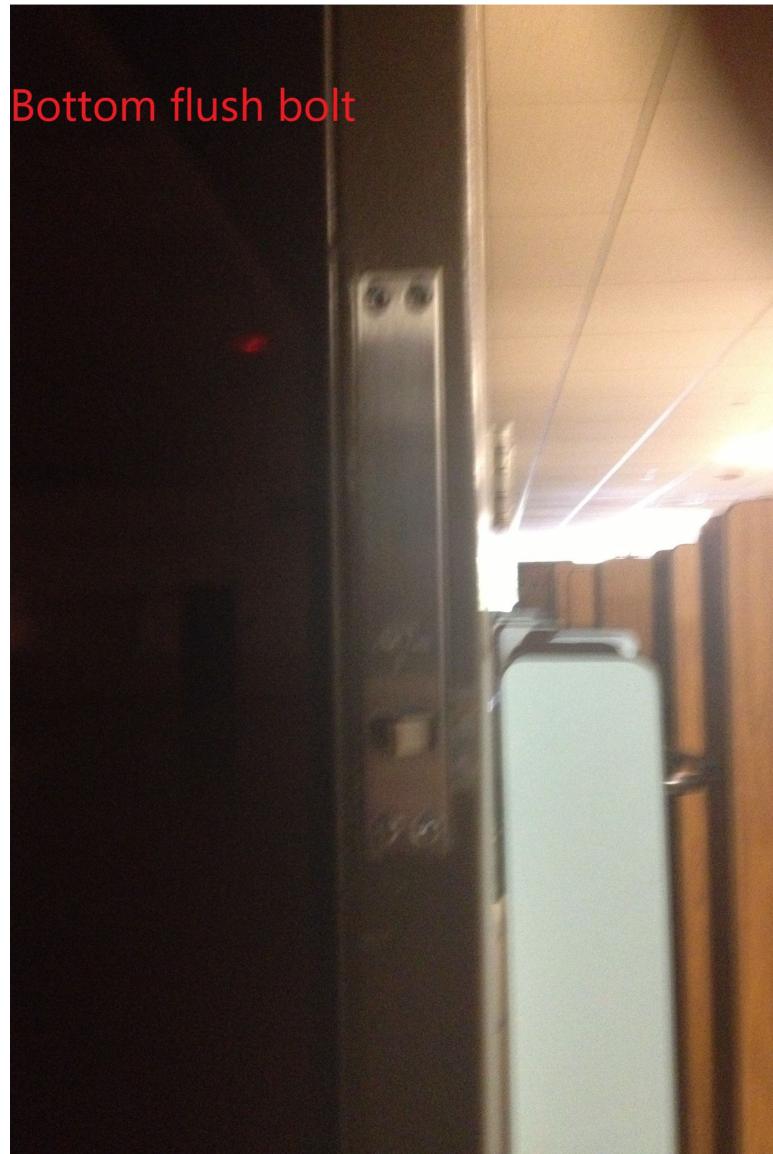
I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: RF-05 Ryan Lynn Date: 10/9/2019
Signed: Ryan Lynn

E-Mail: _____



Top flush bolt



Bottom flush bolt