

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

FACID/Building: NY 22 AFM 52

Date of Visit: 3/12/20

Contractor Personnel on Site:

1. Tom

2. Amie

### Work Performed:

Preventive Maintenance - (Annual, Quarterly, Monthly, Daily, etc.)

Preventive Maintenance -(Annual, Quarterly, Monthly, equipment identification, etc.)  
Service Orders - CFS 27766

CERTIFICATION OF WORK

To be signed by the Contractor.

Print Name: \_\_\_\_\_

Signed:

Date:

37012

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 CORBO Date: 16 May 21  
Signed: Louis Corbo  
E-Mail: Louis.A.CORBO-CTR@mail.mil





