

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

FACID/Building: Pr 042

Date of Visit: 9/13/19

Contractor Personnel on Site:

1. Tony Cozans
2. Jim Geegelgans
3. Scott Werry

- 4.
- 5.
- 6.

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. 10801
2. 10936
3. 10857
- 4.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Geegelgans

Date: 9-13-19

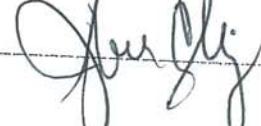
Signed: 

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: Jennifer Shively

Date: 20190913

Signed: 

E-Mail: