

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

FACID/Building: PC-07-11

Date of Visit: 9/17/19

Contractor Personnel on Site:

- | | | |
|----------------|---------------|----------|
| 1. <u>Tony</u> | <u>Carmon</u> | 4. _____ |
| 2. <u>Jim</u> | <u>Gestpi</u> | 5. _____ |
| 3. _____ | _____ | 6. _____ |

Work Performed:

Other Recurring Services

- | | |
|-----------------|-------|
| 1. <u>10712</u> | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Tony Carmon

Date: 9/17/19

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: Andrew Mank, GS-11

Date: 17 Sep 2019

Signed: [Signature]

E-Mail: _____