

CERTIFICATION OF WORK

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

FACID/Building: WV 006

Date of Visit: 3/25/19

Contractor Personnel on Site:

1. Isaac Peit

2. _____

Work Performed:

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

PM/SO	WO #	Asset #	PM #	Asset Description
CSS#	16386			PANK BAR MECHANICAL FAILED

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Isaac Peit

Date: 3/25/19

Signed: [Signature]

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: Larry Salai Date: 25 MAR

Signed: [Signature]

E-Mail: Larry.g.salai.mil@mil.mil

LABOR \$75.00/HR

4 HRS x \$75.00 = \$300.00

JACKSON PANIC DEVICE
PART # JA1095RC4628

COST \$177.38

20% Markup = \$35.48

YOUR COST \$212.86

OTHER PARTS NEEDED \$60.00

SERVICE CALL \$75.00

300.00

212.86

60.00

+ 75.00

TOTAL 647.86