

CERTIFICATION OF WORK

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

FACID/Building: WV010

Date of Visit: 12/18/18

Contractor Personnel on Site:

1. Steve Tregear
2. Carter Householder

Work Performed:

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

1. WO# 153051

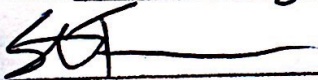
Service Calls - Service Call Number and Description

1. CSS# 15032
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

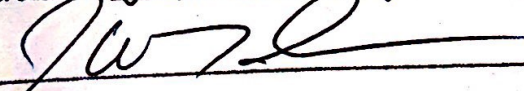
Print Name: Steve Tregear Date: 12/18/18

Signed: 

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: JOHN THOMAS / SGT Date: 12-18-18

Signed: 

E-Mail: john.w.thomas11.mil@mail.mil