https://mail.google.com/mail/u/0/?tab=wm#inbox/FMfcgxwBVglgmcLXcqGMzqdcKmhkQQbd?projector=1&messagePartId=0.27

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

FACID/Building: WV009 AMSA 102-G
269 ARMORY RD.
CLARKSBURG, WV. 26301

Date of Visit: 2/11/19

Contractor Personnel on Site:

1. Roy Runyan 2. mike Vecchio

Work Performed:

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

1. WO#

Service Calls – Service Call Number and Description

1. CSS# 17639
2. CSS#
3. CSS#

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Roy Runyan Date: 2-11-19

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: 1LT Flaugher, Christopher Date: 11 FEB 19

Signed:

E-Mail: christopher.j.flaugher.mil@mail.mil