

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

FACTID/Building: WV 041

Date of Visit: 9/20/19

Contractor Personnel on Site:

1. Tony Lozano

2. Jim Gerstgen

3. _____

4. _____

5. _____

6. _____

Work Performed:

Other Recurring Services

1. 10756

2. _____

3. _____

4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jim Gerstgen

Date: 9-20-19

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: Julia L. Bane

Date: 20190920

Signed: _____

E-Mail: _____