JOB COMPLETION / CLIENT ACCEPTANCE CERTIFICATE

Client Information **Ref No:**

Company/Name: CMFI.	**Contact Person:**
	E-mail Address: Cmfing@Yahoo.com
Physical address: GULU	**Telephone No.:** 0785619613
	Alternative No.: 0785705521
Site ID: GULU UNIVERSITY	**Designation :** Dr.

Field Engineer

Vendor Name: Runway	**Equipment Details**
Date : 24/07/2020	**Type of Equipment:** Microwave
Time in : 8:30	**Model Name :** Comsun
Time out :	**Model Number:** Force 190
	Serial No.:

Activity

Installation	Installation done and service tested
Support	
Additional service	

Acceptance

Client Remarks /Signature	**Vendor Engineer Remarks /Signature**	**Solutions Delivery Manager Signature**
Speed two slow. I request it to be suspended and I get a dedicated one	Benjamin	

Billing

Start billing date:	**BPA:**

Head Enterprise Solutions **Head Credit Control**