

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: WV009 Date of Visit: Oct. 7, 2024

Contractor Personnel on Site:

1. Ricky Barker 3. _____
2. _____ 4. _____

Work Performed: monthly pm

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

1. WO 16780 asset G057
2. WO 16800 asset 3975
3. WO 16833 asset G118
4. WO 16781 asset G058
5. WO 16834 asset G119

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Richard A. Barker Date: Oct. 7, 2024
Signed: Richard A. Barker

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: Jennifer A Bailie/Contractor AFOS Date: 10/30/2024
Signed: Jennifer A Bailie
E-Mail: jennifer.a.bailie.ctr@army.mil