

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

FACID/Building: VA033

Date of Visit: 12/17/2025

Contractor Personnel on Site:

1. Casto Tech      2. \_\_\_\_\_

**Work Performed:**

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

1. WO# 229435

**Service Calls – Service Call Number and Description**

1. CSS# FEMS# 3433088  
2. CSS# \_\_\_\_\_  
3. CSS# \_\_\_\_\_

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**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Shawn Shelton      Date: 12/17/2025

Signed: Shawn Shelton

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: Jordan Waugh GS9      Date: 12/17/2025

Signed: Jordan Waugh

E-Mail: jordan.t.waugh.civ@army.mil