

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

FACID/Building: VA012

Date of Visit: 12/8/2023

Contractor Personnel on Site:

1. Casto Tech

2. _____

Work Performed:

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

1. WO# 203195

Service Calls – Service Call Number and Description

1. CSS# 95962

2. CSS# _____

3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Shawn V. Shelton Date: 12/8/2023

Signed: Shawn V. 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: Bryan Beard Date: 12/8/2023

Signed: Bryan Beard

E-Mail: bryan.d.beard.civ@army.mil