

**CERTIFICATION OF WORK**

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

FACID/Building: CrossLanes WV Date of Visit: 3-29-23

Contractor Personnel on Site:

1. Keith Pearson
2. PAUL LoRUSSO
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

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

1. CSS # 91504
2. WO # 11801
3. EST # 2181

Diagnosed & replaced defective Reader @mainGate

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Keith Pearson Date: 3-29-23

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: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

E-Mail: \_\_\_\_\_