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

FACID/Building: _PA118N01_ Date of Visit: _08_

Contractor Personnel on Site:

1. _Dereck Wright_   2. _____

Work Performed:

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

1. _Reprogram main FACP_

Service Calls – Service Call Number and Description

1. CSS# _98568_
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _Dereck Wright_ Date _08-16-24_

Signed: _[signature]_

To be signed by Facility Manager:

By signing the Certification of Work, 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. This is **NOT a Certification that the Work was performed correctly** – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: Benjamin L. Shields   Date: 20240816

Signed: SHIELDS.BENJAMIN.L
EE.1034148178

Digitally signed by SHIELDS.BENJAMIN.LEE.1034148178
DN: c=US, o=U.S. Government, ou=DoD, ou=PKI, ou=USA,
cn=SHIELDS.BENJAMIN.LEE.1034148178
Date: 2024.08.16 09:47:29 -04'00'
Adobe Acrobat version: 2024.002.20759

E-Mail: benjamin.l.shields.civ@army.mil