

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

FACID/Building: Fairview PA 209 Date of Visit: 2-19-2026

Contractor Personnel on Site:

1. Troy Grossman
2. Matt Smith

Work Performed:

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

1. _____

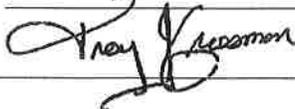
Service Calls – Service Call Number and Description

1. CSS# / WO# 99025
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Troy J. Grossman Date: 2-26-26

Signed: 

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: Scott Kawski Date: 2/27/26

Signed: _____

E-Mail: scott.w.kawski.civ@army.mil