

WO 108562

CERTIFICATION OF WORK

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

FACID/Building: WV046 Parkersburg Date of Visit: 15 Aug 25

Contractor Personnel on Site:

1. Rusty Craft 2. _____

Work Performed:

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

1. reset card cage and VoIP controls

Service Calls – Service Call Number and Description

1. CSS# / WO# FEM 1 3265907 WO 20056
2. CSS# _____
3. CSS# _____



CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Rusty Craft Date: 15 Aug 25

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: Jonathan Friel SSG E6 Date: 15 AUG 25

Signed: [Signature]

E-Mail: jonathan.friel@usar.mil

