

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: _____ Date of Visit: 05-20-25

Contractor Personnel on Site:

- | | |
|------------------------------|----------|
| 1. <u>Christopher Wooten</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# _____ WO# 221407

Description of Repairs

Arrived at site and got information on 2 split
systems for repair or replacement

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Christopher Wooten Date: 05-20-25

Signed: *Christopher Wooten*

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: Thomas Mcburney Date: 20250521

Signed: *Thomas m mcburney*

E-Mail: _____