

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: WV020 Jane Lew Date of Visit: 8-20-25

Contractor Personnel on Site:

1. CUSTOM CONSTRUCTION 4. _____
2. _____ 5. _____
3. _____ 6. _____

Service Call Number

FEMS# 3114271 WO# 18786

Description of Repairs

ADJUSTED DOOR LATCHES (AFFECTING DOOR BUZZER)

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: CHRISTIAN MOORE Date: 8-20-25

Signed: Christian Moore

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: Jennifer A. Baile Date: 8-20-25

Signed: Jennifer A. Baile

E-Mail: jennifer.a.baile.ctr@army.mil