

CERTIFICATION OF WORK

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

FacID/Building: WY035 Date of Visit: 4/4/2024

Contractor Personnel on Site:

1. Casto Tech 2. _____

Work Performed:

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

1. WOM 207200

Service Calls - Service Call Number and Description

1. CSS# 97414
2. CSS#
3. CSS#

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Shawn Shelton Date: 4/4/2024

Signed: Shawn Shelton

To be signed by Facility Manager:

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:

Print Name/Rank: Jean Holley GSO9 Date: 4/4/2024

Signed: Jean Holley

E-Mail: jean.e.holley.civ@army.mil