CERTIFICATION OF WORK
**SERVICE CALL**

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

FACID/Building: MD002 Date of Visit: 4/7/22

Contractor Personnel on Site:

1. Shawn 535
2. _____
3. _____
4. _____
5. _____
6. _____

**Service Call Number**

CSS# 16933 WO# 35435
16932 35434

**Description of Repairs**

Adjusted Closer + hinges on Main Entry Door to Close + Latch Properly

---

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: Shawn Palmer Date: 4/7/22

Signed: [signature]

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: SGT Clifton Moore Date: 4/7/22

Signed: [signature]

E-Mail: clifton.j.moore.mil@army.mil

TENIR
HORS
COURANT