

**CERTIFICATION OF WORK
SERVICE CALL**

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

FACID/Building: Marion VA Date of Visit: 3-27-25

Contractor Personnel on Site:

- | | |
|-------------------------|----------|
| 1. <u>Keith Pearson</u> | 4. _____ |
| 2. <u>Wyatt Rose</u> | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 2966015 WO# 2600

Description of Repairs

Re-wired motion sensors for cage 1, 2 for
separate alarm & tamper zones. Installed 2
new motion sensors. Tested w/ McCoy
All Normal @ time of call.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Keith Pearson Date: 3-27-25

Signed: 

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: _____ Date: _____

Signed: _____

E-Mail: _____