

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

FACID/Building: Crosslanes WK Date of Visit: 3-18-26

Contractor Personnel on Site:

- 1. Keith Pearson
- 2. Wyatt Rose
- 3. _____
- 4. _____
- 5. _____
- 6. _____

Service Calls - Service Call Number and Description

- 1. Fems # - 3536181
- 2. ESL # - 2835
- 3. _____

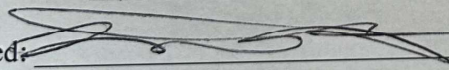
Found a bad cable at the Gate entry Door station.
Pulled New cable, Terminated, tested. Now functional
Also found master station in office S-1 Non Functional

CERTIFICATION OF WORK

Pulled New cable to the master. All Functioning @
Time of call

To be signed by the Contractor:

Print Name: Keith Pearson Date: 3-18-26

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: _____

BELCHER.JASO Digitally signed by
BELCHER.JASON.MICHA

Signed: **N.MICHAEL.10** EL.1050985799

E-Mail: **50985799** Date: 2026.03.20
15:21:13 -04'00'