

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

FACID/Building: W23 MOD 12 PM1000 Date of Visit: 9/15/23

Location Address: Fort Belvoir

Contractor Personnel on Site:
JIMMY TOWN

Work Performed: PERFORM SPACE A/C UNIT

Service Calls - PO/CSS#
C1185071 WO 24243 (B100041087

Please take pictures and send with quote

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: JOHN ABRAHAM Date: 9/15/23

Signed: [Signature]

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site.

Print Name/Rank: LOUIS GORDON Date: SEPT 15, 2023

Signed: [Signature]

Email: LOUIS - A - GORDON - CIV @ ARMY - MIL

