

**CERTIFICATION OF WORK
PREVENTIVE MAINTENANCE**

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

FACID/Building: WV046 Date of Visit: Sep 16, 2024

Contractor Personnel on Site:

- | | |
|------------------------|----------|
| 1. <u>Ricky Barker</u> | 3. _____ |
| 2. _____ | 4. _____ |

Work Performed: monthly pm

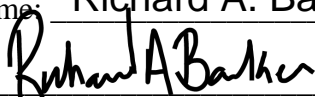
Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

- | | |
|----------|------------------------------------|
| 1. _____ | WO 16490 Asset G073 |
| 2. _____ | WO 16509 Asset 6638,6641 |
| 3. _____ | WO 16556 Asset 4646,4716,5094 |
| 4. _____ | WO 16588 Asset 5279, |
| 5. _____ | 5282,5283,5285,5296 |
| _____ | WO 16491 Asset G074 |
| _____ | WO 16505 Asset 6578,6635,6640 |
| _____ | WO 16571 Asset 4717 |
| _____ | WO 16582 Asset 5250,5261,5327,5328 |
| _____ | WO 16492 Asset G075 |

CERTIFICATION OF WORK

To be signed by the Contractor:

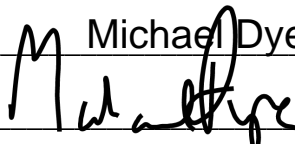
Print Name: Richard A. Barker Date: Sep 16, 2024

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: M Michael Dye /GS09 Date: Sep 16, 2024

Signed: 

E-Mail: michael.l.dye2.civ@army.mil