

## CERTIFICATION OF WORK SERVICE CALL

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

FACID/Building: WV009 Date of Visit: 12/2/2024

Contractor Personnel on Site:

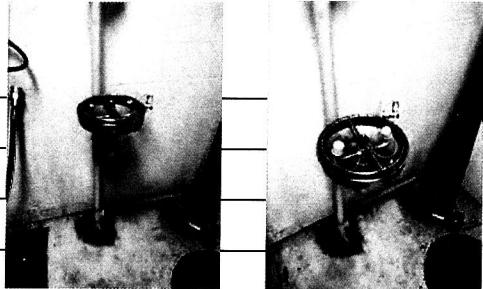
1. <u>Ricky Barker</u>	4. _____
2. _____	5. _____
3. _____	6. _____

### Service Call Number

CSS# 98694 WO# 16648

### Description of Repairs

Provided and installed eyewash tethered dust covers.



## CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Richard A. Barker Date: 12/2/2024

Signed: Richard A. Barker

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: Jennifer Baulie Date: 12/10/24

Signed: Jennifer Baulie

E-Mail: Jennifer.a.baulie.CFRArmy.mil