

Certificate of Completion
IS HEREBY GRANTED TO

Katharine Lajiness

NAME

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

DMA Certification

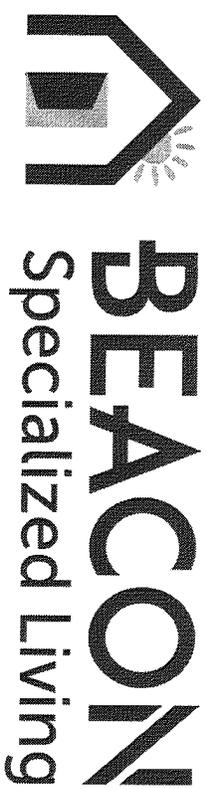
TYPE OF TRAINING

9/17/2019

COMPLETION DATE

TRAINER SIGNATURE

Jessica Perry, BSN, RN



Certificate of Completion
IS HEREBY GRANTED TO

Katharine Lajiness

NAME

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

Medical & Bloodborne Pathogen Training

TYPE OF TRAINING

9/17/2019

COMPLETION DATE

Jessie Long, BSN, RN

TRAINER SIGNATURE