

Certificate of Completion

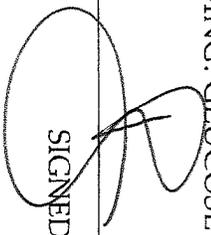
THIS HEREBY CERTIFIES THAT

April Bondie

HAS SUCCESSFULLY MET ALL REQUIREMENTS OF

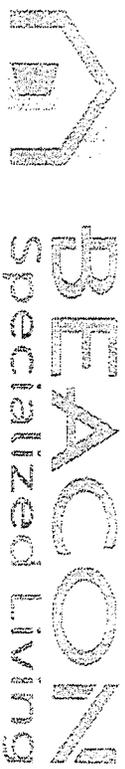
DMA CERTIFICATION

INCLUDING: GLUCOSE MONITORING, SIX RIGHTS AND INSULIN ADMINISTRATION

A handwritten signature in black ink, appearing to read "April Bondie", written over a horizontal line.

SIGNED

09/05/2019



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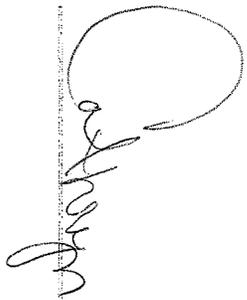
Is hereby granted to:

April Bondie

To certify that they have complete to satisfaction in

"DMA, Medical, & Blood Borne Pathogens Training"

Date: 9/8/19

 Stephen PN
Trainer Signature