

Certificate of Completion

Is hereby granted to:

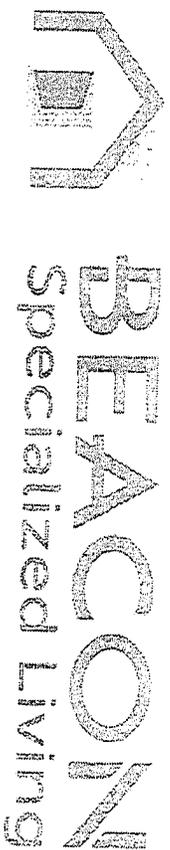
Kelli Blanchard

To certify that they have complete to satisfaction in

"DMA, Medical, & Blood Borne Pathogens Training"

Date: 10/14/2019

Christina Sherman RN
Trainer Signature



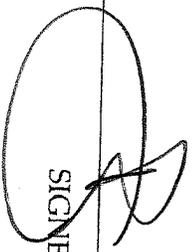
Certificate of Completion

THIS HEREBY CERTIFIES THAT

Kelli Blanchard

HAS SUCCESSFULLY MET ALL REQUIREMENTS OF
DMA CERTIFICATION

INCLUDING: GLUCOSE MONITORING, SIX RIGHTS AND INSULIN ADMINISTRATION


SIGNED

10/14/2019