



Certificate of Completion

IS HEREBY GRANTED TO

Cheryl Shook

NAME

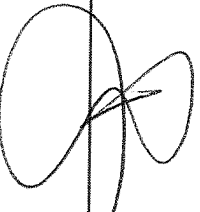
TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

DMA Train the Trainer

TYPE OF TRAINING

10/01/2020

COMPLETION DATE

David Schwert

TRAINER SIGNATURE