

BEACON

Specialized Living

Certificate of Completion

IS HEREBY GRANTED TO

Kelly Evans

NAME

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

DMA Medical Training

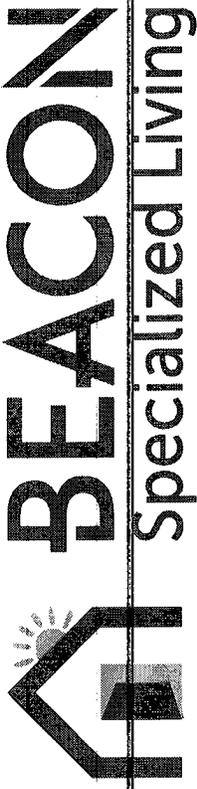
TYPE OF TRAINING

12/28/2021

COMPLETION DATE

Tracee Vineyard RN

TRAINER SIGNATURE



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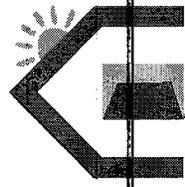
Cheyenne Sutherland
NAME

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TYPE OF TRAINING

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Trace Vinyard RA
TRAINER SIGNATURE



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Stephania Simpson

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Courtney Aube

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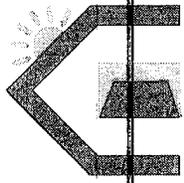
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Amanda Davis

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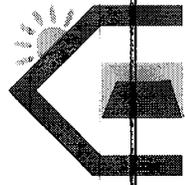
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