

Certificate of Completion
IS HEREBY GRANTED TO

Hunter Bowles

NAME

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

DMA Medical Training

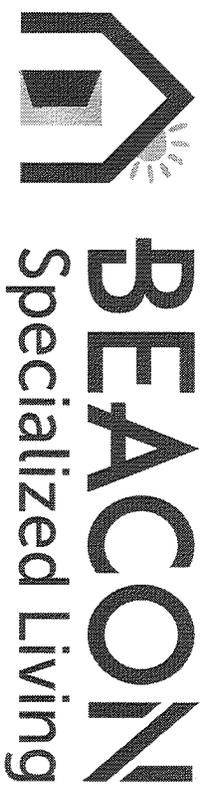
TYPE OF TRAINING

2/9/2022

COMPLETION DATE

Trace Vnesperal RN

TRAINER SIGNATURE



Certificate of Completion
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Anna Griffin

NAME

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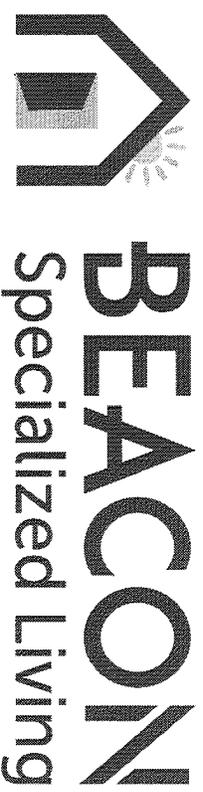
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Tracee Vinyard RN

TRAINER SIGNATURE



Certificate of Completion
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Ashley Godin

NAME

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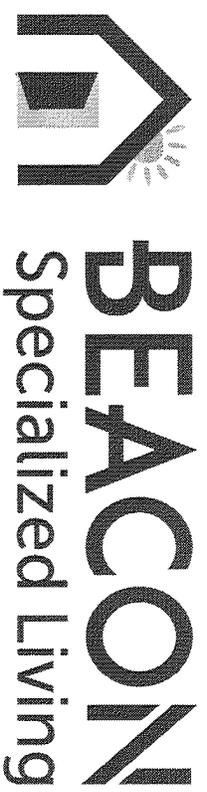
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Melissa LaBonte

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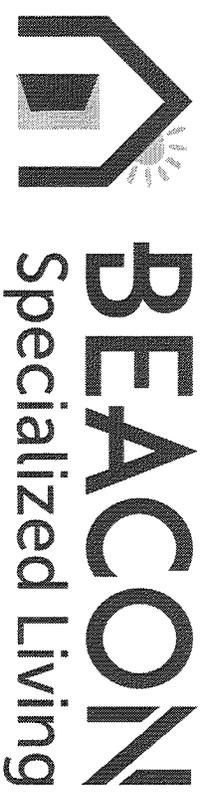
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Cameron Laporte

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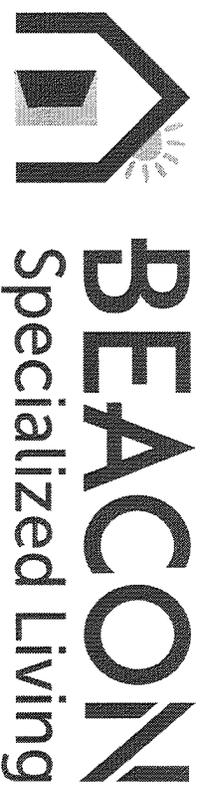
TYPE OF TRAINING

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Trace Vreeland

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Becky Shay

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Tracee Vinograd RN

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Frank Talaska

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Tracie Vneyard

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