

CERTIFICATE OF COMPLETION

The undersigned has successfully completed the listed educational program.

Participant Name: _____

May 10, 2018

Date: _____

Presentation Title: *How a Broken Pipe Saved My Building – An Outpatient Facility Retro-commissioning Story*

Location: NIU Conference Center, Naperville, IL

Presenter: Joseph Jozsa, Interactive Building Solutions
LaMar Davis, Shirley Ryan AbilityLab (RIC)

1.0 Contact Hrs. (.10 CEUs)



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