

# CERTIFICATE OF COMPLETION

The undersigned has successfully completed the listed educational program.

Participant Name: \_\_\_\_\_

May 3, 2019

Date: \_\_\_\_\_

Presentation Title: *Legionnaires' Disease Prevention and Risk Management*

Location: NIU Conference Center, Naperville, IL

Presenter: Jay Reading, Phigenics, LLC

1.0 Contact Hrs. (.10 CEUs)



Healthcare Engineers Society of Northern Illinois  
[www.hesni.org](http://www.hesni.org)

