

CERTIFICATE OF COMPLETION

The undersigned has successfully completed the listed educational program.

Participant Name _____ Date: April 11, 2019

Presentation Title: *CHSP Preparatory Seminar*

Location: Aramark Conference Center, Downers Grove, IL

Presenters: Paul V. Richter, MA, FASHE, CHEP, CHSP, CEDP

.8 CEUs



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