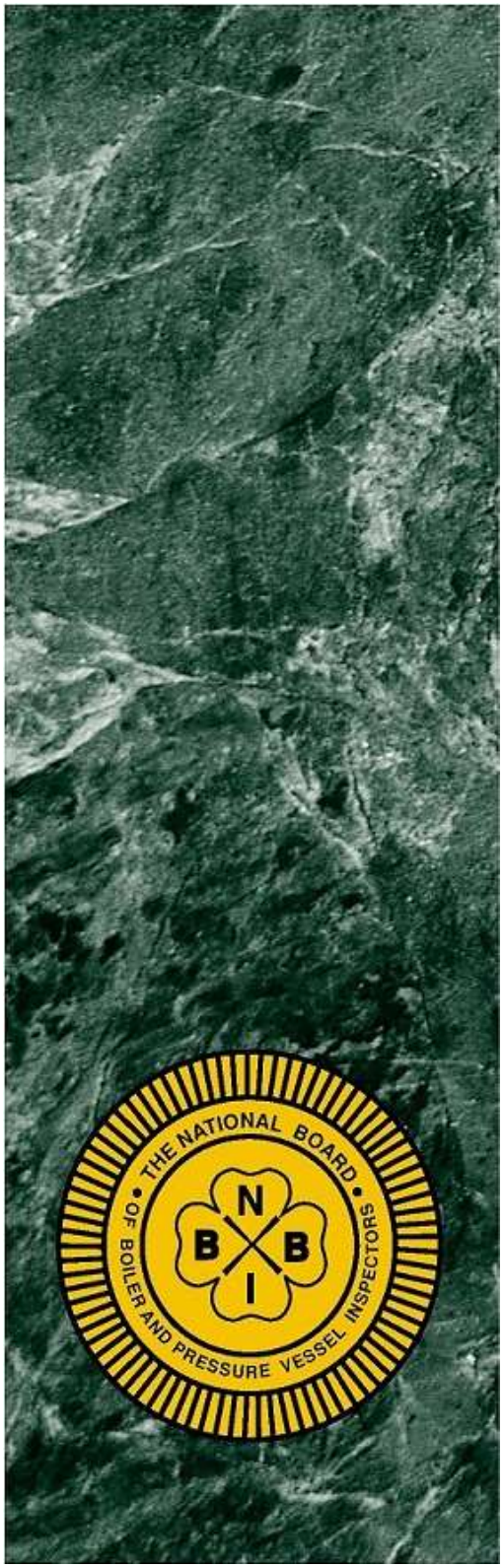


# THE NATIONAL BOARD
## OF
## BOILER & PRESSURE VESSEL INSPECTORS

# Certificate of Completion

This is to verify that

*has completed the*

Location:

Issue Date:

Contact Hours:

Kimberly Miller

**Director of Training**

NB-328 rev. 2