

Continuing Professional Education Certificate of Attendance
—Attendee Copy—

Participant Name: _____

Registration Number: _____

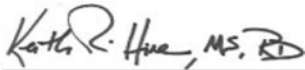
Activity Title: Optimizing Brain Health through Nutrition: Harnessing The Power
of Metabolism and Immunity

CPEU Sponsor: Orgain, LLC

Activity Number: 185623

Date Completed: _____ Number of CPEUs Awarded: 1.0

*Suggested Performance Indicator(s): 13.4.3, 9.1.1, 9.1.5



Provider Signature

RETAIN ORIGINAL COPY FOR YOUR RECORDS

**Refer to your Professional Development Portfolio Guide For LNCs or Pls*