



Certificate of Attendance

LAST NAME: _____
FIRST NAME: _____
COMPANY OR AFFILIATION: _____
License or Permit Number: _____

We are pleased to confirm that the person named herein has attended the AFAA NJ General Meetings on the following dates: *(this line would validate current membership as well as Board of Director Meeting attendance if relevant)*

02/19/05
05/22/05
09/24/05
11/24/05

Each of our General Meetings is structured to provide our membership, among other things, a legislative report/update on both the Division of Consumer Affairs and the Division of Community Affairs, the two licensing bodies that affect the fire alarm/fire protection/life safety business in NJ. Each meeting also provides a one-hour technical presentation on a prevailing topic relevant to our industry.

Robert M. Ryan, Asst. Secretary AFAA-NJ

Date