## CERTIFICATION

This is to certify that I	BROTHER/SISTER
rom the Locale of	, District/Division of
	is an <b>ACTIVE</b> member of (NAME OF GROUP)
	, Teatro Kristiano.
This certification is	being issued upon the request of Brother/Sister
	to let him/her perform his/her duties at the Local of
	(DISTRICT), (DIVISION).
Done this day of _	20
Signature over printed name	
GROUP COORDINATOR	
Mobile/Viber #:: Date:	
	S THE STATE OF THE
Signature over printed name ASSIGNED SERVANT	
Mobile/Viber #::	
Date:	
	<b>喜喜喜喜</b>
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