

**CERTIFICATE OF TRAINING**

This is to certify that I have completed training for USOPSEC 4.0 AND IDM FY22/23

**Gregg Legarda**

Name:

**01/11/2022 CIC**

Date:

Component/Office:

Continuing Education Units: 0

By digitally signing and submitting your proof of training certificate, you certify that you have reviewed and understand the information in this training course.

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Signature (Digitally Signed)