To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.heart.org/cpr/mycards.

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**Optional modules completed:**

**Issue Date**

**Training Center Name**

**Training Center ID**

**Recommended Renewal Date**

**Instructor Name**

**Instructor ID**

**eCard Code**

**QR Code**

**Training Center Address**

**Training Center Phone**

**Number**

**Heartsaver**

**®**

**First Aid**

**CPR AED**

**HEARTSAVER**

**has successfully completed the cognitive and skills**

**evaluations in accordance with the curriculum of the**

**American Heart Association Heartsaver**

**®**

**First Aid CPR AED Program.**



Ira Toles

8/28/2018

08/2020

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