




STATEMENT OF ATTENDANCE

License Number:

Dear

Thank you for your participation in the CCCEP-accredited CE program entitled
ImmunizNation: Practical Strategies for Recommending Immunization to Patients at Risk of HZ. On , you successfully completed all program requirements.

	CCCEP File No. TBC
	Accredited for TBC
	Program Accredited TBC
	Program Accreditation Expires TBC

For questions regarding this CE program, please contact MEDUCOM Health Inc. at cme@meducom.ca.

We hope you enjoyed the program!

Sincerely,

MEDUCOM Health Inc. on behalf of the CPD Network