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Continuing Professional Education Certificate of **Attendance**—**Attendee** Copy—

the credentialing agency for the Academy of Nutrition Participant Name:

| articipant Name. | | | | |
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| Registration N | lumber: | | | |
| Activity Title: | y Title: Performance Nutrition for Active Adults: Fueling Wo | | | |
| | and Fitness | | | |
| CPEU Sponsor: Orgain, LLC | | | | |
| Activity Number: 174028 | | | | |
| Date Completed: Number of CPEUs Awarded: 1.0 | | | | |
| *Suggested Performance Indicator(s): 10.2.10; 10.3.1; 8.3.6; 8.3.7; 9.6.9 | | | | |

Provider Signature

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*Refer to your Professional Development Portfolio Guide For LNCs or Pls