l,	, from the	Board of Education certify that I attended the
June 27, 2020 D	elegate Assembly begi	nning at 9:00 A.M. until its completion at
A.M/P.M.		
I understand tha	at if I have made a willf	fully false statement, I am subject to punishment.
Date:	_ Ву:	
	write name	
Address/City/St	ate/Zip Code	