



*This is to certify that*

*Abraham Jose Shocron*  
Name

*Abrassil Co., Inc.*  
Company

*has successfully completed*  
*FirePro Xtinguish certification training.*

Instructor

A handwritten signature in black ink, appearing to read "Abraham Jose Shocron", written over a horizontal line.

Certification Number *A1603-0148-01-Gg*

Expiration Date *March 04, 2018*

\* Total Classroom Time = 4 Hours

