

CERTIFICATE OF TRAINING

Completed the following training:

Records Management/Retention Training (RCW 40.14)

(Check Box(es) for Training Completed)

- Basics of Records Management Tutorial
- Public Officials and Public Records Tutorial

Date Training Received:

Sponsor (Organization/agency providing training): Washington State Archives

Format:

- Online Tutorial Training

I hereby certify that I received this training: _____
Signature & Position or Title