

I,	, certify that I have receiv	ed the following equipment from the
Camden County, MO Emergen	ncy Management Agency at the conclu	usion of my training for the Camden
County, MO Community Emer	rgency Response Team.	-
Circle one:		
- Full CERT Pack		
- I un CERT I dek		
- Partial CERT Pack (see atta	iched list)	
- NO CERT Pack		
Level One CERT members wil	I not be provided with a pack because	e they have opted to take training to assist
	Packs are furnished by the CC MO C	5
assisting with their communities	·	
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A copy of the equipment list ca	an be found at comocert.com for those	e who wish to put their own pack together.
Signature		Date
5.8		24.0
Printed Name		Cell Phone Number
CERT ID NUMBER		Pack number
Witness signature		Date