

Today's Date: 7-2-21

Vaccine Certification:

I attest that I am "fully vaccinated" against COVID-19 per CDC guidelines. "Fully vaccinated" means it has been at least **two (2) weeks** since I received:

- a single-dose vaccine (such as Johnson & Johnson); or
- the second dose of a two-dose vaccine (such as Pfizer or Moderna).

I provide this information on a voluntary and non-confidential basis, certify that it is true and correct, and authorize Hudson Bay Insulation to verify with any appropriate parties the information contained herein.

Date of Final COVID-19 Vaccine: 6-18-21

Hudson Bay Insulation Co. Guidelines and Protocols Agreement:

By signing my name below, I also agree to comply with all HBI's guidelines and protocols related to COVID-19.

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Signature: Dale Murphy Date: 7-2-21

Printed Name: Dale Murphy