









## To whom it may concern,

This is to certify that according to our records/proof presented to us:

Last name / Surname		
First name(s)		
Date of birth		
Current address		
City		
Country		
This certification is being is	ssued upon the request of the applicant.	Stamp (optional)
Name and date		
Signature		
Position		
Contact e-mail		
Company / University		

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