



# CERTIFICATE *of* COURSE COMPLETION

The  
**Paternity Opportunity Program**

hereby certifies that

***Haley McDermont***

of

***Medical City Plano***

has completed training on  
Acknowledgement of Paternity

on this day,

March 13, 2025.



Ruth Ann Thornton  
Director of Child Support Division



# CERTIFICATE *of* COURSE COMPLETION

The  
**Paternity Opportunity Program**

hereby certifies that

***Haley McDermont***

of

***Medical City Las Colinas***

has completed training on  
Acknowledgement of Paternity

on this day,

March 13, 2025.

  
Ruth Ann Thornton  
Director of Child Support Division