Continuing Education Course Completions in the State of Texas

Confirmation

Provider : 363747477 - SERVICEMASTER CLEAN

Course : 31379 - Insurance Fraud

Course Category : General

ServiceType : CE Course Completions

Request Date : 08-19-2015 State Texas Requestor Lori H Hart

Confirmation ID	SSN	NPN	Lic Nbr	Name	Status	Reference ID	Error Message
115973234	xxx-xx-3641		856517	MARILYN K KUSS	Processed		wessaye
115973245	xxx-xx-4228		336668	DEBORA RUSSELL THOMAS	Processed		
115973248	xxx-xx-3349		1871289	YSABEL CISNEROS JOPLING	Processed		
115973238	xxx-xx-7492		1474147	ROBERT THEODORE STEESE	Processed		
115973227	xxx-xx-3607		1925361	MICHELLE RENEE CARR	Processed		
115973228	xxx-xx-2368		1556574	SHANNON RAENEA FLORES	Processed		
115973241	xxx-xx-0573		1405098	DAISY ESPINOZA	Processed		
115973229	xxx-xx-6427		1828991	CAROLINE KAY GLASS	Processed		
115973252	xxx-xx-9953		300631	KERRIË JOSEPH POWELL	Processed		
115973240	xxx-xx-9754		1386367	JEANINE BRADY TRIGG	Processed		
115973251	xxx-xx-6406		989065	MARILYN RUTH FITCH	Processed		
115973249	xxx-xx-9616		1609738	JAIME VIELMA	Processed		
115973237	xxx-xx-6414		1 4/11/45	DANIEL A REYES	Processed		
115973243	xxx-xx-1741		278671	JAMES MILTON SHEPPARD	Processed		
115973246	xxx-xx-9908		631569	MODESTA HERNANDEZ MUNOZ	Processed		

	115973239	xxx-xx-8129	1863279	JEKMAIN BIBLE	Processed	
	115973242	xxx-xx-1997	1836912	ANGELA MICHELLE RICHARDSON	Processed	
	115973232	xxx-xx-9095	1586768	OANH LE HEATH	Processed	
	115973233	xxx-xx-5237	1287195	LINDA LOU ROBINSON	Processed	
	115973235		121068		Error	The License Number could not be found in the state database.
	115973244	xxx-xx-6698	1334987	KATHY KIM	Processed	
	115973250	xxx-xx-1136	1436399	RHONDA FAYE PUMPHREY	Processed	
	115973247	xxx-xx-1611	1718841	NATHAN DARYL WHITTLESEY	Processed	
	115973253	xxx-xx-7626	1932083	DOUGLAS EUGENE CONN	Processed	
3	115973255	xxx-xx-7043	479003	LINDA J DELLES	Processed	
	115973254	xxx-xx-4017	510020	ROBERT LARRY HADEN	Processed	
	115973230	xxx-xx-0473	1603988	AARON JASON WHITE	Processed	
	115973231	xxx-xx-5012	1872206	LYSSA Marie PITTS	Processed	
	115973236	xxx-xx-2728	1872698	LISA DENISE ANDERSON	Processed	
	115973225	xxx-xx-5752	1114021	RALPH HOWARD SHAW	Processed	
			Gen	erate Certificates		
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Continuing Education Course Completions in the State of Texas

Confirmation						
Provider :: 363747477 - SERVICEMASTER CLEAN						
Course : 31379 - Insurance Fraud						
Course Category : General						
ServiceType		: CE Course	Completions			
Request Date		: 08-19-2015	5			
State		: Texas				
Requestor		Lori H Hart				
Confirmation ID	SSN	NPN Lic Nbr	Name	Status	Reference ID	Error Message
115973615	xxx-xx-0479	1674485	LEONARD ROY HEINZE	Processed		
115973613	xxx-xx-9053	1633650	SUSAN LOFTIS	Processed		
115973612	xxx-xx-8526	1218068	BARBARA ANN GILLILAND	Processed		
		Gene	erate Certificates			
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Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT MARILYN K K	USS 856517
(Name AS 0	ON LICENSE) (License Number)
has taken and successfully completed o Education. This course of study has bee Insurance in accordance with its regulati	n this day the above course of study for Continuing n filed and approved by the Texas Department of ons.
Course Completion Date: 08-19-2015	
The above Continuing Education credits	have been submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four y	rears.
Prepared on:	08-19-2015

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT DEBORA RUSSELL T (Name AS ON LIC	HOMAS , 336668 ENSE) (License Number)
has taken and successfully completed on this d Education. This course of study has been filed Insurance in accordance with its regulations.	lay the above course of study for Continuing
Course Completion Date: 08-19-2015	
The above Continuing Education credits have b	peen submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19-2015

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT YSABEL CIS	NEROS JOPLING , 1871289 ON LICENSE) (License Number)
has taken and successfully completed of	on this day the above course of study for Continuing en filed and approved by the Texas Department of
Course Completion Date: 08-19-2015	
The above Continuing Education credits	s have been submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four	years.
Prepared on:	08-19-2015

Offering Number (optional): 30820

Course Name: Insurance	e Fraud	,
Total Credit Hours: 3.0 General 3.	•	
Course certified as: Cla	assroom	
THIS HEREBY CERTIFIES T	HAT ROBERT THEODORE STEESE III	, 1474147 (License Number)
has taken and successfi Education. This course of Insurance in accordance	(Name AS ON LICENSE) fully completed on this day the above of study has been filed and approved to with its regulations.	course of study for Continuing
Course Completion Date	e: 08-19-2015	
The above Continuing E	Education credits have been submitted	for official banking by:
Provider Number: SERVICEMASTER CLEAN		
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027		
LICENSEE must retain	for at least four years.	
Prepared on:		08-19-2015

Offering Number (optional): 30820

Course Name: Insurance Fraud	enemig rumber (epiterial), esset
Total Credit Hours: 3.0 , as follows General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT MICHELLE RENEE CAI	
has taken and successfully completed on this da Education. This course of study has been filed a Insurance in accordance with its regulations.	y the above course of study for Continuing nd approved by the Texas Department of
Course Completion Date: 08-19-2015	
The above Continuing Education credits have be Provider Number: SERVICEMASTER CLEAN	een submitted for official banking by:
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19-2015

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT SHANNON RAENEA (Name AS ON LIC	
has taken and successfully completed on this of Education. This course of study has been filed Insurance in accordance with its regulations.	day the above course of study for Continuing and approved by the Texas Department of
Course Completion Date: 08-19-2015	
The above Continuing Education credits have I	been submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19-2015

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT DAISY ESPINOZA	, 1405098
(Name AS ON LIC	ENSE) (License Number)
has taken and successfully completed on this d Education. This course of study has been filed a Insurance in accordance with its regulations.	ay the above course of study for Continuing and approved by the Texas Department of
Course Completion Date: 08-19-2015	
The above Continuing Education credits have b	peen submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19-2015

Course Number: 313 Course Name: Insura		Offering Number	er (optional): 30820
Total Credit Hours: 3	3.0 , as follows		
General	3.0		
Course certified as:	Classroom		
THIS HEREBY CERTIFIE	S THAT CAROLINE KAY GLA		, 1828991
	(Name AS ON LIC	ENSE)	(License Number)
Education. This cours	ssfully completed on this o se of study has been filed nce with its regulations.	lay the above co and approved by	urse of study for Continuing the Texas Department of
Course Completion D)ate: 08-19-2015		
The above Continuing	g Education credits have b	peen submitted fo	or official banking by:
Provider Number: SERVICEMASTER CLE	AN		
PO BOX 751027 FHI-18 MEMPHIS, TN 38175-10			
LICENSEE must reta	in for at least four years.		
Prepared on:		0	8-19-2015

Course Number: 31379 Course Name: Insurance Fraud		Offering Number	r (optional): 30820
Total Credit Hours: 3.	0 , as follows		
General	3.0		
Course certified as:	Classroom		
THIS HEREBY CERTIFIES	THAT KERRIE JOSEPH PO	WELL	300631
	(Name AS ON LIC	ENSE)	(License Number)
Education. This course	sfully completed on this description of study has been filed and the with its regulations.	ay the above cou and approved by	urse of study for Continuing the Texas Department of
Course Completion Da	ate: 08-19-2015		
The above Continuing	Education credits have b	een submitted fo	or official banking by:
Provider Number: SERVICEMASTER CLEA	ıN		
PO BOX 751027 FHI-183 MEMPHIS, TN 38175-102			
LICENSEE must retain	n for at least four years.		
Prepared on:		30	3-19-2015

Offering Number (optional): 30820

Course Name: Insurance Fraud
Total Credit Hours: 3.0 , as follows General 3.0
Course certified as: Classroom
HIS HEREBY CERTIFIES THAT JEANINE BRADY TRIGG , 1386367 (Name AS ON LICENSE) (License Number)
as taken and successfully completed on this day the above course of study for Continuing ducation. This course of study has been filed and approved by the Texas Department of assurance in accordance with its regulations.
Course Completion Date: 08-19-2015
he above Continuing Education credits have been submitted for official banking by:
rovider Number: SERVICEMASTER CLEAN
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027
ICENSEE must retain for at least four years.
repared on: 08-19-2015

Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as follows General 3.0			
Course certified as: Classroom			
THIS HEREBY CERTIFIES THAT MARILYN RUTH FITO (Name AS ON LIC			
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19-2015			
The above Continuing Education credits have b	peen submitted for official banking by:		
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at least four years.			
Prepared on:	08-19-2015		

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT JAIME VIELMA	, _1609738
(Name AS ON LIC	(License Number)
has taken and successfully completed on this of Education. This course of study has been filed Insurance in accordance with its regulations.	day the above course of study for Continuing and approved by the Texas Department of
Course Completion Date: 08-19-2015	
The above Continuing Education credits have I	peen submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19-2015

Course Number: 31379 Course Name: Insurance Fr	aud	Offering Numbe	er (optional): 30820
Total Credit Hours: 3.0	, as follows		
General 3.0			
Course certified as: Classr	room		
THIS HEREBY CERTIFIES THAT			1370735
	(Name AS ON LICE	ENSE)	(License Number)
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date:	08-19-2015		
The above Continuing Educ	cation credits have b	een submitted fo	or official banking by:
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for a	at least four years.		
Prepared on:		90	3-19 - 2015

Offering Number (optional): 30820

Course Name: Insurance Fraud	(
Total Credit Hours: 3.0 , as follows General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT JAMES MILTON SHEPPAR (Name AS ON LICENS	
has taken and successfully completed on this day the Education. This course of study has been filed and a linearance in accordance with its regulations.	ne above course of study for Continuing approved by the Texas Department of
Course Completion Date: 08-19-2015	
The above Continuing Education credits have been	submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19 - 2015

Course Number: 31379 Course Name: Insurance		Offering Numbe	er (optional): 30820
Total Credit Hours: 3.0	, as follows		
General 3	.0		
Course certified as: CI	assroom		
THIS HEREBY CERTIFIES T	HAT MODESTA HERNAND	EZ MUNOZ	, 631569
	(Name AS ON LICE	ENSE)	(License Number)
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date	e: 08-19-2015		
The above Continuing Education credits have been submitted for official banking by:			
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain	for at least four years.		
Prepared on:		0	8-19-2015

Course Number: 31379

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as f	ollows		
General 3.0			
Course certified as: Classroom			
THIS HEREBY CERTIFIES THAT TER			
(Na	me AS ON LICENSE) (License Number)		
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19	2015		
The above Continuing Education	credits have been submitted for official banking by:		
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at lea	st four years.		
Prepared on:	08-19-2015		

Course Number: 31379 Offering Number (optional): 30820 Course Name: Insurance Fraud Total Credit Hours: 3.0 , as follows General 3.0 Course certified as: Classroom THIS HEREBY CERTIFIES THAT ANGELA MICHELLE RICHARDSON (Name AS ON LICENSE) has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations. Course Completion Date: 08-19-2015 The above Continuing Education credits have been submitted for official banking by: Provider Number: SERVICEMASTER CLEAN PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027 LICENSEE must retain for at least four years. Prepared on: 08-19-2015

Offering Number (optional): 30820

Course Name: Insurance Fraud
Total Credit Hours: 3.0 , as follows General 3.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT OANH LE HEATH , 1586768
(Name AS ON LICENSE) (License Number) has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.
Course Completion Date: 08-19-2015
The above Continuing Education credits have been submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027
LICENSEE must retain for at least four years.
Prepared on: 08-19-2015

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as follows			
General 3.0			
Course certified as: Classroom			
THIS HEREBY CERTIFIES THAT LINDA LOU ROBINSO	ON 1.287195		
(Name AS ON LIC	ENSE) (License Number)		
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19-2015			
The above Continuing Education credits have be	peen submitted for official banking by:		
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at least four years.			
Prepared on:	08-19-2015		

Course Number: 31379 Course Name: Insurance Frau	Offering Numb	oer (optional): 30820	
Total Credit Hours: 3.0 , a	as follows		
General 3.0			
Course certified as: Classroo	om		
THIS HEREBY CERTIFIES THAT	KATHY KIM	, 1334987	
((Name AS ON LICENSE)	(License Number)	
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08	3-19-2015		
The above Continuing Education credits have been submitted for official banking by:			
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at	least four years.		
Prepared on:		08-19-2015	

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as follows			
General 3.0			
Course certified as: Classroom			
THIS HEREBY CERTIFIES THAT RHONDA FAYE PUMP	PHREY 1436399		
THIS HEREBY CERTIFIES THAT RHONDA FAYE PUMP (Name AS ON LIC	ENSE) (License Number)		
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19-2015			
The above Continuing Education credits have b	een submitted for official banking by:		
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at least four years.			
Prepared on:	08-19-2015		

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as follows			
General 3.0			
Course certified as: Classroom			
THIS HEREBY CERTIFIES THAT NATHAN DARYL WHI	TTLESEY , 1718841		
(Name AS ON LIC	ENSE) (License Number)		
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19-2015			
The above Continuing Education credits have been submitted for official banking by:			
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at least four years.			
Prepared on:	08-19-2015		

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as follows			
General 3.0			
Course certified as: Classroom			
THE REPERVISION OF THE POLICE AS ELIGENE	CONN 400000		
THIS HEREBY CERTIFIES THAT DOUGLAS EUGENE (Name AS ON LIC			
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19-2015			
The above Continuing Education credits have b	een submitted for official banking by:		
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at least four years.			
Prepared on:	08-19-2015		

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT LINDA J DELLES	479003
(Name AS ON LIC	ENSE) (License Number)
has taken and successfully completed on this d Education. This course of study has been filed a Insurance in accordance with its regulations.	lay the above course of study for Continuing and approved by the Texas Department of
Course Completion Date: 08-19-2015	
The above Continuing Education credits have b	peen submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19-2015

Course Number: 31379 Course Name: Insurance Fra	Offe	ering Number (optional):	30820
Total Credit Hours: 3.0 ,	as follows		
General 3.0			
Course certified as: Classro	oom		
THIS HEREBY CERTIFIES THAT	ROBERT LARRY HADEN	, 510020	
	(Name AS ON LICENS	E) (License Nu	mber)
has taken and successfully Education. This course of si Insurance in accordance wi	tudy has been filed and	he above course of study approved by the Texas D	for Continuing epartment of
Course Completion Date:	08-19-2015		
The above Continuing Educ	cation credits have been	submitted for official banl	king by:
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for a	at least four years.		
Prepared on:		08-19-2015	

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as follows			
General 3.0			
Course certified as: Classroom			
THIS HEREBY CERTIFIES THAT AARON JASON WHIT			
(Name AS ON LIC	ENSE) (License Number)		
has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19-2015			
The above Continuing Education credits have I	been submitted for official banking by:		
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at least four years.			
Prepared on:	08-19-2015		

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as follows			
General 3.0			
Course certified as: Classroom			
THIS HEREBY CERTIFIES THAT LYSSA Marie PITTS	, 1872206		
(Name AS ON LICENSE) (License Number) has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19-2015			
The above Continuing Education credits have t	peen submitted for official banking by:		
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at least four years.			
Prepared on:	08-19-2015		

Course Number: 31379 Course Name: Insurance Fi		ng Number (optional):	30820
Total Credit Hours: 3.0	, as follows		
General 3.0			
Course certified as: Class	room		
THIS HEREBY CERTIFIES THAT	LISA DENISE ANDERSON	, 1872698	
	(Name AS ON LICENSE)	(License Nu	mber)
has taken and successfully Education. This course of s Insurance in accordance w	completed on this day the study has been filed and ap ith its regulations.	above course of study proved by the Texas D	for Continuing epartment of
Course Completion Date:	08-19-2015		
The above Continuing Edu	cation credits have been su	ubmitted for official ban	king by:
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for	at least four years.		
Prepared on:		08-19-2015	

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT RALPH HOWARD SH	AW JR 1114021 ENSE) (License Number)
has taken and successfully completed on this of Education. This course of study has been filed Insurance in accordance with its regulations.	lay the above course of study for Continuing
Course Completion Date: 08-19-2015	
The above Continuing Education credits have t	peen submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19-2015

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820		
Total Credit Hours: 3.0 , as follows General 3.0			
Course certified as: Classroom			
THIS HEREBY CERTIFIES THAT LEONARD ROY HEIN	IZE , 1674485		
(Name AS ON LICENSE) (License Number) has taken and successfully completed on this day the above course of study for Continuing Education. This course of study has been filed and approved by the Texas Department of Insurance in accordance with its regulations.			
Course Completion Date: 08-19-2015			
The above Continuing Education credits have I	peen submitted for official banking by:		
Provider Number: SERVICEMASTER CLEAN			
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027			
LICENSEE must retain for at least four years.			
Prepared on:	08-19-2015		

Course Number: 31379 Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as fol	lows
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT DEBC	DRAH SUSAN LOFTIS 1633650
	ne AS ON LICENSE) (License Number)
	leted on this day the above course of study for Continuing as been filed and approved by the Texas Department of regulations.
Course Completion Date: 08-19-2	2015
The above Continuing Education	credits have been submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at leas	st four years.
Prepared on:	08-19-2015

Course Name: Insurance Fraud	Offering Number (optional): 30820
Total Credit Hours: 3.0 , as follows General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT BARBARA ANN GILL (Name AS ON LIC	
has taken and successfully completed on this of Education. This course of study has been filed Insurance in accordance with its regulations.	
Course Completion Date: 08-19-2015	
The above Continuing Education credits have I	peen submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	08-19-2015