Course Number: 90416 Course Name: Odor Mitigation	Offering Number (optional):
Total Credit Hours: 3.0 , as fo	llows
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT RAYE	re AS ON LICENSE) (License Number)
has taken and successfully comp	pleted on this day the above course of study for Continuing has been filed and approved by the Texas Department of
Course Completion Date: 02-10-2	2016
The above Continuing Education	credits have been submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least	st four years.
Prepared on:	02-11-2016

Offering Number (optional):

Course Number: 90416

Course Name: Odor Mitigation

Total Credit Hours: 3.0 , as follows General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT SUZETTE RENEE NUTALL JAMES (Name AS ON LICENSE)	(License Number)
has taken and successfully completed on this day the above co Education. This course of study has been filed and approved by Insurance in accordance with its regulations.	
Course Completion Date: 02-10-2016	
The above Continuing Education credits have been submitted for	or official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	2-11-2016

Course Number: 90416 Course Name: Odor Mitigation	Offering Number (optional):
Total Credit Hours: 3.0 , as follows General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT JIM WILLIAM FORTH (Name AS ON LIC	MAN , 1613231 (License Number)
has taken and successfully completed on this c 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: 02-10-2016	
The above Continuing Education credits have	been submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	02-11-2016

Offering Number (optional):

Course Name: Odor Mitigation	ing riambor (optional).
Total Credit Hours: 3.0 , as follows General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT CLAUDIA ANN UNANTENNE (Name AS ON LICENSE has taken and successfully completed on this day the Education. This course of study has been filed and approximately completed.)	e above course of study for Continuing
Insurance in accordance with its regulations. Course Completion Date: 02-10-2016	opiovod by the Toxac Bopartment of
The above Continuing Education credits have been s Provider Number: SERVICEMASTER CLEAN	ubmitted for official banking by:
PO BOX 751027 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	02-11-2016

Offering Number (optional):

Course Name: Odor Mitigation	· ·	
Total Credit Hours: 3.0 , a General 3.0	s follows	
Course certified as: Classroo	m	
THIS HEREBY CERTIFIES THAT (/ALERIE MARIE STUART Name AS ON LICENSE)	_, <u>1981904</u> (License Number)
has taken and successfully control Education. This course of stu Insurance in accordance with	ompleted on this day the above on the description of the description o	course of study for Continuing by the Texas Department of
Course Completion Date: 02	2-10-2016	
The above Continuing Educa Provider Number: SERVICEMASTER CLEAN	tion credits have been submitted	for official banking by:
PO BOX 751027 MEMPHIS, TN 38175-1027		
LICENSEE must retain for at	least four years.	
Prepared on:		02-11-2016

Course Number: 90416
Course Name: Odor Mitigation

Oddi Miligali		
Total Credit Hours: 3.0 , General 3.0	, as follows	
Course certified as: Classr	room	
THIS HEREBY CERTIFIES THAT	DANA MICHELLE FORTHMAN	, 1602684
	(Name AS ON LICENSE)	(License Number)
	completed on this day the above of completed on this day the above of the completed and approved ith its regulations.	
Course Completion Date:	02-10-2016	
The above Continuing Edu	cation credits have been submitted	d for official banking by:
Provider Number: SERVICEMASTER CLEAN		
PO BOX 751027 MEMPHIS, TN 38175-1027		
LICENSEE must retain for	at least four years.	
Prepared on:		02-11-2016

Offering Number (optional):

Course Name: Odor Mitigation		
Total Credit Hours: 3.0 , General 3.0	as follows	
Course certified as: Classro	oom	
THIS HEREBY CERTIFIES THAT	EDWARD BOYD (Name AS ON LICENSE)	,
	completed on this day the above tudy has been filed and approved	course of study for Continuing
Course Completion Date: (02-10-2016	
The above Continuing Educ Provider Number: SERVICEMASTER CLEAN	cation credits have been submitte	d for official banking by:
PO BOX 751027 MEMPHIS, TN 38175-1027		
LICENSEE must retain for a	at least four years.	
Prepared on:		02-11-2016

Course Number: 90416 Course Name: Odor Mitigation	Offering Number (optional):
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT GLENDA MICHEL (Name AS ON	LICENSE) , 1594624 (License Number)
	is day the above course of study for Continuing led and approved by the Texas Department of s.
Course Completion Date: 02-10-2016	
The above Continuing Education credits have	ve been submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four year	'S.
Prepared on:	02-11-2016

Course Number: 90416 Course Name: Odor Mitigation	Offering Number (optional):
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT ELIZABETH TAMARA (Name AS ON LIC	
has taken and successfully completed on this c Education. This course of study has been filed Insurance in accordance with its regulations.	day the above course of study for Continuing
Course Completion Date: 02-10-2016	
The above Continuing Education credits have t	peen submitted for official banking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on:	02-11-2016

Course Number: 90416

Course Name: Odor Mitigation
otal Credit Hours: 3.0 , as follows General 3.0
Course certified as: Classroom
HIS HEREBY CERTIFIES THAT ERICA RAMIREZ RODRIGUEZ , 1543603 (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 insurance in accordance with its regulations.
Course Completion Date: 02-10-2016
The above Continuing Education credits have been submitted for official banking by: Provider Number: SERVICEMASTER CLEAN PO BOX 751027
MEMPHIS, TN 38175-1027
ICENSEE must retain for at least four years.
Prepared on: 02-11-2016

Offering Number (optional):

Course Name: Odor Mitigation
Total Credit Hours: 3.0 , as follows General 3.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT JOHN ANTHONY AVILA , 1613543 (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: 02-10-2016
The above Continuing Education credits have been submitted for official banking by: Provider Number: SERVICEMASTER CLEAN
PO BOX 751027 MEMPHIS, TN 38175-1027
LICENSEE must retain for at least four years.
Prepared on: 02-11-2016