

## Continuing Education Course Completions in the State of Texas

## Confirmation

**Provider** : 363747477 - SERVICEMASTER CLEAN  
**Course** : 10835 - SMOKE AND ODOR DAMAGE MITIGATION  
**Course Category** : General  
**ServiceType** : CE Course Completions  
**Request Date** : 03-30-2015  
**State** : Texas  
**Requestor** : Lori H Hart

Confirmation ID	SSN	NPN Lic Nbr	Name	Status	Reference ID	Error Message
109588463	xxx-xx-3668	1115532	LYNN RENEE SELL	Processed		
109588467	xxx-xx-9778	1822787	CYNTHIA SAUCEDA	Processed		
109588466	xxx-xx-0543	365074	DEBRA ELDRIDGE-HUTTO	Processed		
109588465	xxx-xx-1521	1809379		Error		The Last Name does not match the person identified by the License Number.
109588458	xxx-xx-2228	1853948		Error		The Last Name does not match the person identified by the License Number.
109588457	xxx-xx-8908	705859	ROSALINDA VIDAL	Processed		
109588459	xxx-xx-7055	1080383		Error		The Last Name does not match the person identified by the License Number.
109588464	xxx-xx-4486	1830281	TASHA JOANN BOWMAN	Processed		
109588456	xxx-xx-1313	991364	KATHLEEN ELIZABETH SOMMERS	Processed		
109588461	xxx-xx-4309	1075457	DEBORAH G EXFORD	Processed		
109588460	xxx-xx-8000	1194368	JODY L	Processed		

LUCKIE

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Confirmation ID	SSN	NPN Lic Nbr	Name	Status	Reference ID	Error Message
109588673	xxx-xx-2228	1853948	KIM TODORA	Processed		
109588675	xxx-xx-1521	1809379	IRMA MACK BENNETT	Processed		
109588674	xxx-xx-3449	1080323	ELAINE JONES BACON	Processed		

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**CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION**  
**Texas Department Of Insurance**

Course Number: 10835

Offering Number (optional): 29690

Course Name: SMOKE AND ODOR DAMAGE MITIGATION

Total Credit Hours: 3.0 , as follows

General 3.0

Course certified as: Classroom

**THIS HEREBY CERTIFIES THAT** CYNTHIA SAUCEDA, 1822787  
(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: 03-28-2015

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:

03-30-2015

**CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION  
Texas Department Of Insurance**

Course Number: 10835

Offering Number (optional): 29690

Course Name: SMOKE AND ODOR DAMAGE MITIGATION

Total Credit Hours: 3.0 , as follows

General

3.0

Course certified as: Classroom

**THIS HEREBY CERTIFIES THAT** DEBRA ELDRIDGE-HUTTO, 365074  
(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: 03-28-2015

The above Continuing Education credits have been submitted for official banking by:

Provider Number:

SERVICEMASTER CLEAN

PO BOX 751027 FHI-1834

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LICENSEE must retain for at least four years.

Prepared on:

03-30-2015



**CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION**  
**Texas Department Of Insurance**

Course Number: 10835

Offering Number (optional): 29690

Course Name: SMOKE AND ODOR DAMAGE MITIGATION

Total Credit Hours: 3.0 , as follows

General 3.0

Course certified as: Classroom

THIS HEREBY CERTIFIES THAT TASHA JOANN BOWMAN, 1830281  
(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: 03-28-2015

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:

03-30-2015



**CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION**  
**Texas Department Of Insurance**

Course Number: 10835

Offering Number (optional): 29690

Course Name: SMOKE AND ODOR DAMAGE MITIGATION

Total Credit Hours: 3.0 , as follows

General                      3.0

Course certified as: Classroom

**THIS HEREBY CERTIFIES THAT** KATHLEEN ELIZABETH SOMMERS, 991364  
**(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: 03-28-2015

The above Continuing Education credits have been submitted for official banking by:

Provider Number:  
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LICENSEE must retain for at least four years.

Prepared on:

03-30-2015

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**Texas Department Of Insurance**

Course Number: 10835    Offering Number (optional): 29690  
Course Name: SMOKE AND ODOR DAMAGE MITIGATION

Total Credit Hours: 3.0 , as follows

General    3.0

Course certified as: Classroom

**THIS HEREBY CERTIFIES THAT** DEBORAH G EXFORD, 1075457  
(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: 03-28-2015

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Course Number: 10835

Offering Number (optional): 29690

Course Name: SMOKE AND ODOR DAMAGE MITIGATION

Total Credit Hours: 3.0 , as follows

General 3.0

Course certified as: Classroom

**THIS HEREBY CERTIFIES THAT** JODY L LUCKIE, 1194368  
(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: 03-28-2015

The above Continuing Education credits have been submitted for official banking by:

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Prepared on:

03-30-2015



**CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION**  
**Texas Department Of Insurance**

Course Number: 10835    Offering Number (optional): 29690  
Course Name: SMOKE AND ODOR DAMAGE MITIGATION

Total Credit Hours: 3.0 , as follows

General    3.0

Course certified as: Classroom

**THIS HEREBY CERTIFIES THAT** IRMA MACK BENNETT, 1809379  
(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: 03-28-2015

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:

03-30-2015

