| Course Number: 91473 Course Name: Custom | Officer Service and Professionalism | fering Numbe | r (optional): |
|--|-------------------------------------|----------------|-------------------------|
| Total Credit Hours: 1.0 | , as follows | | |
| Ethics | 1.0 | | |
| Course certified as: C | Classroom | | |
| THIS HEREBY CERTIFIES | THAT CASEY BROOKE HEGE | , | 1525483 |
| | (Name AS ON LICEN | SE) | (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 Da | | | |
| The above Continuing | Education credits have bee | n submitted to | or official banking by: |
| Provider Number: SERVICEMASTER ADVA | NCED RESTORATION/FRYCO | | |
| 1630 WEST EULESS BLV EULESS, TX 76040-6825 | /D | | |
| LICENSEE must retain | for at least four years. | | |
| Prepared on: | | 03 | 3-28-2014 |

| Course Name: Custor | oer: 91473 Offering Number (optional): 9: Customer Service and Professionalism | | |
|--|---|------------------|-------------------------|
| Course Name. Custon | nel Service and Professionalis | 111 | |
| Total Credit Hours: 1 | 0 , as follows | | |
| Ethics | 1.0 | | |
| | | | |
| | | | |
| Course certified as: | Classroom | | |
| | | | |
| THIS HEREBY CERTIFIES | STHAT KATHLEEN MARIE S | ELLS | ,147546 |
| | (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 D | ate: 03-27-2014 | | |
| The above Continuing | g Education credits have t | peen submitted f | or official banking by: |
| Provider Number: SERVICEMASTER ADV | ANCED RESTORATION/FRYO | 00 | |
| 1630 WEST EULESS BL EULESS, TX 76040-682 | | | |
| LICENSEE must retain | in for at least four years. | | |
| Prepared on: | | C | 03-28-2014 |

| Course Number: 91473 Offering Number (optional): Course Name: Customer Service and Professionalism | | | |
|--|------------------------------|------------------|-------------------------|
| Total Credit Hours: 1 | ı.0 , as follows | | |
| Ethics | 1.0 | | |
| Course certified as: | Classroom | | |
| THIS HEREBY CERTIFIE | S THAT CHRIS M GILLIAM | | 1392558 |
| | (Name AS ON LICI | 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 D | Date: 03-27-2014 | | |
| The above Continuin | g Education credits have b | een submitted fo | or official banking by: |
| Provider Number: SERVICEMASTER ADVANCED RESTORATION/FRYCO | | | |
| 1630 WEST EULESS B EULESS, TX 76040-682 | | | |
| LICENSEE must reta | ain for at least four years. | | |
| Prepared on: | | 0 | 3-28-2014 |

| Course Number: 91473 Offering Number (optional): Course Name: Customer Service and Professionalism | | |
|--|--|--|
| Total Credit Hours: 1.0 , as follows Ethics 1.0 | | |
| Course certified as: Classroom | | |
| THIS HEREBY CERTIFIES THAT SUZANNE QUENICHET FULLER (Name AS ON LICENSE) 1825047 (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: 03-27-2014 | | |
| The above Continuing Education credits have been submitted for official banking by: | | |
| Provider Number: SERVICEMASTER ADVANCED RESTORATION/FRYCO | | |
| 1630 WEST EULESS BLVD EULESS, TX 76040-6825 | | |
| LICENSEE must retain for at least four years. | | |
| Prepared on: 03-28-2014 | | |

| Course Number: 91473 Offering Number (optional): Course Name: Customer Service and Professionalism | | |
|--|---|--|
| Total Credit Hours: 1.0 , as follows | | |
| Ethics 1.0 | | |
| | | |
| Course certified as: Classroom | | |
| | | |
| THIS HEREBY CERTIFIES THAT MARK LANDON WIL | SON 1444529 | |
| THIS HEREBY CERTIFIES THAT MARK LANDON WILL (Name AS ON LIC | (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: 03-27-2014 | | |
| The above Continuing Education credits have | been submitted for official banking by: | |
| Provider Number: SERVICEMASTER ADVANCED RESTORATION/FRYCO | | |
| 1630 WEST EULESS BLVD EULESS, TX 76040-6825 | | |
| LICENSEE must retain for at least four years. | | |
| Prepared on: | 03-28-2014 | |

| Course Number: 914 Course Name: Custo | 473 omer Service and Professionalis | Offering Numbe m | r (optional): |
|--|--|---------------------|-------------------------|
| Total Credit Hours: 1 | .0 , as follows | | |
| Ethics | 1.0 | | |
| Course certified as: | Classroom | | |
| THIS HEREBY CERTIFIE | S THAT ADAM T SYSWERDA | , | 1825567 |
| | (Name AS ON LICI | 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 D | Date: 03-27-2014 | | |
| The above Continuin | g Education credits have b | een submitted fo | or official banking by: |
| Provider Number: SERVICEMASTER ADV | /ANCED RESTORATION/FRYC | O | |
| 1630 WEST EULESS B EULESS, TX 76040-682 | | | |
| LICENSEE must reta | ain for at least four years. | | |
| Prepared on: | | 0 | 3-28-2014 |