| Course Number: 91473<br>Course Name: Customer Sel |  | ber (optional):            |
|---|--|----------------------------|
|   |  |                            |
| Total Credit Hours: 1.0 ,                         | as follows   |                            |
| Ethics 1.0  |  |                            |
|   |  |                            |
|   |  |                            |
| Course certified as: Classro                      | oom  |                            |
|   |  |                            |
| THIS HEREBY CERTIFIES THAT                        | TRACY LYN GARDNER  | 1093692                    |
| THIS HEREBT CERTIFIES THAT                        | (Name AS ON LICENSE)   |                            |
|   | completed on this day the above tudy has been filed and approved th its regulations. | ,                          |
| Course Completion Date:                           | 09-19-2013   |                            |
|   |  |                            |
| The above Continuing Educ                         | cation credits have been submitted   | d for official banking by: |
| Provider Number:<br>SERVICEMASTER ADVANCED        | RESTORATION/FRYCO  |                            |
| 1630 WEST EULESS BLVD<br>EULESS, TX 76040-6825    |  |                            |
| LICENSEE must retain for a                        | at least four years.   |                            |
| Prepared on:                                      |  | 09-20-2013                 |

| Course Number: 91473 Course Name: Customer Service and Professionalis  | Offering Number (optional):             |  |
|--|---|--|
| Total Credit Hours: 1.0 , as follows   |   |  |
| Ethics 1.0   |   |  |
|  |   |  |
| Course certified as: Classroom   |   |  |
|  |   |  |
| THIS HEREBY CERTIFIES THAT WILLIAM CLINTON S (Name AS ON LIC   | TARK                                    |  |
| (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: 09-19-2013   |   |  |
| The above Continuing Education credits have  | peen submitted for official banking by: |  |
| Provider Number:<br>SERVICEMASTER ADVANCED RESTORATION/FRY   | co                                      |  |
| 1630 WEST EULESS BLVD<br>EULESS, TX 76040-6825   |   |  |
| LICENSEE must retain for at least four years.  |   |  |
| Prepared on:   | 09-20-2013                              |  |

| Course Number: 91473 Course Name: Customer Service and Professionalis  | Offering Number (optional):<br>m        |  |
|--|---|--|
| Total Credit Hours: 1.0 , as follows   |   |  |
| Ethics 1.0   |   |  |
|  |   |  |
| Course certified as: Classroom   |   |  |
|  |   |  |
| THIS HEREBY CERTIFIES THAT JO AVALON LOWE  | 406378                                  |  |
| (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: 09-19-2013   |   |  |
| The above Continuing Education credits have be   | peen submitted for official banking by: |  |
| Provider Number:<br>SERVICEMASTER ADVANCED RESTORATION/FRYC  | 00                                      |  |
| 1630 WEST EULESS BLVD<br>EULESS, TX 76040-6825   |   |  |
| LICENSEE must retain for at least four years.  |   |  |
| Prepared on:   | 09-20-2013                              |  |

| Course Number: 914<br>Course Name: Custo   | 173<br>omer Service and Professionalis | Offering Numbe<br>m | r (optional):  |
|--|--|---------------------|--|
| Total Credit Hours: 1                      | .0 , as follows                        |                     |  |
| Ethics                                     | 1.0                                    |                     |  |
| Course certified as:                       | Classroom                              |                     |  |
| THIS HEREBY CERTIFIE                       | S THAT KIMBERLY GAYLE IS               | BELL                | ,302094  |
|  | (Name AS ON LIC                        | ENSE)               | (License Number)                                     |
| Education. This cours                      |  | •                   | urse of study for Continuing the Texas Department of |
| Course Completion D                        | Date: 09-19-2013                       |                     |  |
| The above Continuin                        | g Education credits have b             | peen submitted fo   | or official banking by:                              |
| Provider Number:<br>SERVICEMASTER ADV      | /ANCED RESTORATION/FRYC                | 00                  |  |
| 1630 WEST EULESS B<br>EULESS, TX 76040-682 |  |                     |  |
| LICENSEE must reta                         | ain for at least four years.           |                     |  |
| Prepared on:                               |  | 0                   | 9-20-2013  |

| Course Number: 91473 Course Name: Customer Service and Professionalis  | Offering Number (optional):             |  |
|--|---|--|
| Total Credit Hours: 1.0 , as follows   |   |  |
| Ethics 1.0   |   |  |
|  |   |  |
| Course certified as: Classroom   |   |  |
|  |   |  |
| THIS HEREBY CERTIFIES THAT SYLVIA M BROWN  | 1117550                                 |  |
| THIS HEREBY CERTIFIES THAT SYLVIA M BROWN (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: 09-19-2013   |   |  |
| The above Continuing Education credits have be   | peen submitted for official banking by: |  |
| Provider Number:<br>SERVICEMASTER ADVANCED RESTORATION/FRYC  | o                                       |  |
| 1630 WEST EULESS BLVD<br>EULESS, TX 76040-6825   |   |  |
| LICENSEE must retain for at least four years.  |   |  |
| Prepared on:   | 09-20-2013                              |  |

| Course Number: 91473 Course Name: Customer Service and Professionalis  | Offering Number (optional):             |  |
|--|---|--|
| Total Credit Hours: 1.0 , as follows   |   |  |
| Ethics 1.0   |   |  |
|  |   |  |
| Course certified as: Classroom   |   |  |
| THIS HERERY CERTIFIES THAT LEONARD ROY HEIN  | ZE 1674485                              |  |
| THIS HEREBY CERTIFIES THAT LEONARD ROY HEIN (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: 09-19-2013   |   |  |
| The above Continuing Education credits have be   | peen submitted for official banking by: |  |
| Provider Number:<br>SERVICEMASTER ADVANCED RESTORATION/FRYC  | O                                       |  |
| 1630 WEST EULESS BLVD<br>EULESS, TX 76040-6825   |   |  |
| LICENSEE must retain for at least four years.  |   |  |
| Prepared on:   | 09-20-2013                              |  |

| Course Number: 91473 Course Name: Customer S   |                             | Offering Numb | er (optional):   |
|--|-----------------------------|---------------|--|
| Course Marine. Customers                       | Service and Professionalism | I             |  |
| Total Credit Hours: 1.0                        | , as follows                |               |  |
| Ethics 1.0                                     |                             |               |  |
|  |                             |               |  |
|  |                             |               |  |
| Course certified as: Class                     | sroom                       |               |  |
|  |                             |               |  |
| THIS HEREBY CERTIFIES TH                       |                             |               | _, _445860   |
|  | (Name AS ON LICE            | NSE)          | (License Number)   |
|  | study has been filed a      | •             | ourse of study for Continuing by the Texas Department of |
| Course Completion Date:                        | 09-19-2013                  |               |  |
|  |                             |               |  |
| The above Continuing Ed                        | lucation credits have be    | en submitted  | for official banking by:                                 |
| Provider Number:<br>SERVICEMASTER ADVANC       | ED RESTORATION/FRYC         | 0             |  |
| 1630 WEST EULESS BLVD<br>EULESS, TX 76040-6825 |                             |               |  |
| LICENSEE must retain fo                        | or at least four years.     |               |  |
| Prepared on:                                   |                             |               | 09-20-2013   |