Continuing Education Course Completions in the State of Texas

Confirmation

Provider : 363747477 - SERVICEMASTER CLEAN

Course : 31375 - Subrogation Reporting on Mitigation Claims

: 31375 Course Category : General
ServiceType : CE Cour : CE Course Completions

Request Date : 07-12-2013 State : Texas Requestor : Lori H Hart

Confirmation ID	SSN	NPN Lic Nbr	Name	Status	Reference ID	Error Message
83540244	xxx-xx-6248	1281156	i.	Error		The Last Name does not match the person identified by the License Number.
83540238	xxx-xx-0312	883241	CHARLENE HEDRICK	Processed		
83540235	xxx-xx-4228	336668	DEBORA RUSSELL THOMAS	Processed		
83540234	xxx-xx-0731	1408410	ERIC AUSTIN RICHARDS	Processed		
83540237	xxx-xx-4776	1210370	JANICE BICKFORD MCCARTER	Processed		
83540236	xxx-xx-6655	1255501	D'ANN ROGERS	Processed		
83540239	xxx-xx-5954	1369715	ROBERT SHAWN BLACKMAN	Processed		
83540243	xxx-xx-9616	1609738	JAIME VIELMA	Processed		
83540245	xxx-xx-4252	1589305	MAUREEN CRAFT PITTMAN	Processed		
83540246	xxx-xx-2584	1252489	ZACK MZEE OGUR	Processed		
83540233	xxx-xx-3650	935556	RICKY WAYNE HILL	Processed		
83540232	xxx-xx-6891	1502321	GREGORY CHARLES JOPLING	Processed		
83540242	xxx-xx-5809	1485884	YADIRA ALVARADO	Processed		TO THE PERSON NAMED IN COLUMN
83540240	xxx-xx-4031	1496734	ROBERTO	Processed		

		ALVAR	ADO	
83540241	xxx-xx-6555	1796859	Error	The Last Name does not match the person identified by the License Number.
THE PROPERTY OF THE PROPERTY O		Generate C	ertificates	
		Continue Processin	g Main Menu	

Home | Help | News Releases | FAQ | State Information | NAIC Information

Copyright © 1998-2013 Sircon Corp. | Email Support | 877-876-4430 | 1500 Abbot Rd Ste.100 | East Lansing, MI 48823

Continuing Education Course Completions in the State of Texas

Confirmation						
Provider : 363747477 - SERVICEMASTER CLEAN Course : 31375 - Subrogation Reporting on Mitigation Claims Course Category : General ServiceType : CE Course Completions Request Date : 07-12-2013 State : Texas Requestor : Lori H Hart						
Confirmation ID	SSN	NPN Lic Nbr		Status	Reference ID	Error Message
83540568	xxx-xx-2509	1496859	JAMES THOMAS COOK	Processed		
83540569	xxx-xx-6248	1281156	JOAN ELLEN BLANKENSHIP	Processed		
Generate Certificates Continue Processing Main Menu						

Home | Help | News Releases | FAQ | State Information | NAIC Information

Copyright © 1998-2013 Sircon Corp. | Email Support | 877-876-4430 | 1500 Abbot Rd Ste.100 | East Lansing, MI 48823

Course Number: 313 Course Name: Subro	75 gation Reporting on Mitigation		r (optional): 20478
Total Credit Hours: 3	.0 , as follows		
General	3.0		
Course certified as:	Classroom		
THIS HEREBY CERTIFIES	CHARLENE HEDRIC		883241 (License Number)
Education. This cours			urse of study for Continuir the Texas Department of
Course Completion D	ate: 07-10-2013		
The above Continuing	g Education credits have	been submitted for	or official banking by:
Provider Number: SERVICEMASTER CLEA	AN		
PO BOX 751027 FHI-183 MEMPHIS, TN 38175-10			
LICENSEE must retai	n for at least four years.		
Prepared on:		0	7-12-2013

Course Number: 31375 Course Name: Subrogation Reporting on Mitigation	Offering Number (optional): 20478 Claims				
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				
(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: 07-10-2013					
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:	07-12-2013				

Offering Number (optional): 20478

Course Name: Subrogation Rep	orting on Mitigation Claims	
Total Credit Hours: 3.0 , as General 3.0	follows	
Course certified as: Classroon	n	
This hereby certifies that $\frac{E^{I}}{(I)}$	RIC AUSTIN RICHARDS Jame AS ON LICENSE)	, <u>1408410</u> (License Number)
	mpleted on this day the above only has been filed and approved better the regulations.	
Course Completion Date: 07-	10-2013	
The above Continuing Educati	on 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 l	east four years.	
Prepared on:		07-12-2013

Course Number: 31375 Course Name: Subrogation Reporting on Mitigation (Offering Number (optional): 20478 Claims
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT JANICE BICKFORD M (Name AS ON LICE	
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
Course Completion Date: 07-10-2013	
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:	07-12-2013

Course Number: 31375 Offering Number (optional): 20478 Course Name: Subrogation Reporting on Mitigation Claims Total Credit Hours: 3.0 , as follows General 3.0 Course certified as: Classroom THIS HEREBY CERTIFIES THAT D'ANN ROGERS (License Number) (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: 07-10-2013 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: 07-12-2013

Offering Number (optional): 20478

Course Name: Subrogation Reporting on Mitigation Claims
Total Credit Hours: 3.0 , as follows
General 3.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT ROBERT SHAWN BLACKMAN , 1369715 (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: 07-10-2013
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: 07-12-2013

Course Number: 31375 Offering Number (optional): 20478 Course Name: Subrogation Reporting on Mitigation Claims
Total Credit Hours: 3.0 , as follows General 3.0
Control 5.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT JAIME VIELMA , 1609738 (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: 07-10-2013
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: 07-12-2013

Course Number: 31375 Offering Number (optional): 20478 Course Name: Subrogation Reporting on Mitigation Claims
Total Credit Hours: 3.0 , as follows General 3.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT MAUREEN CRAFT PITTMAN , 1589305 (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: 07-10-2013
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: 07-12-2013

Offering Number (optional): 20478

Course Name: Subrogation Reporting on Mitigation Claims
Total Credit Hours: 3.0 , as follows General 3.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT ZACK MZEE OGUR (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: 07-10-2013
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: 07-12-2013

Course Number: 31375 Course Name: Subrogation	n Reporting on Mitigation	_	r (optional): 20478
Total Credit Hours: 3.0	, as follows		
General 3.0			
Course certified as: Class	ssroom		
This hereby certifies th			935556
	(Name AS ON LIC	ENSE)	(License Number)
	f study has been filed		urse of study for Continuing the Texas Department of
Course Completion Date	07-10-2013		
The above Continuing Ed	lucation 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 fo	or at least four years.		
Prepared on:		0	7-12-2013

Offering Number (optional): 20478

Course Number: 31375

Course Name: Subrogation Reporting on Mitigation Claims

Total Credit Hours: 3.0 , as follows General 3.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT GREGORY CHARLES JOPLING , 1502321 (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: 07-10-2013
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
ICENSEE must retain for at least four years.
Prepared on: 07-12-2013

Course Number: 31375 Offering Number (optional): 20478 Course Name: Subrogation Reporting on Mitigation Claims		
Total Credit Hours: 3.0 , as follo	ows	
General 3.0		
Course certified as: Classroom		
THIS HEREBY CERTIFIES THAT YADIR		,1485884
(Name	e AS ON LICENSE)	(License Number)
has taken and successfully comple Education. This course of study ha Insurance in accordance with its re	as been filed and approved	
Course Completion Date: 07-10-20)13	
The above Continuing Education of	redits have been submitted	I 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:		07-12-2013

Course Number: 31375

Offering Number (optional): 20478

Course Name: Subrogation Reporting on Mitigation Claims	
Total Credit Hours: 3.0 , as follows	
General 3.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT ROBERTO ALVARADO (Name AS ON LICENSE)	1496734 License Number)
has taken and successfully completed on this day the above course Education. This course of study has been filed and approved by the Insurance in accordance with its regulations.	se of study for Continuing
Course Completion Date: 07-10-2013	
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: 07-1	12-2013

Course Number: 31375 Course Name: Subrogation Re		er (optional): 20478
Total Credit Hours: 3.0 , a	as follows	
General 3.0		
Course certified as: Classroom	om	
THIS HEREBY CERTIFIES THAT	JAMES THOMAS COOK (Name AS ON LICENSE)	, <u>1496859</u> (License Number)
has taken and successfully c Education. This course of stu Insurance in accordance with	completed on this day the above coudy has been filed and approved by its regulations.	ourse of study for Continuing
Course Completion Date: 07	7-10-2013	
The above Continuing Educa	ation 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:		07-12-2013

Course Number: 31375 Offering Number (optional): 20478 Course Name: Subrogation Reporting on Mitigation Claims Total Credit Hours: 3.0 , as follows General 3.0 Course certified as: Classroom THIS HEREBY CERTIFIES THAT JOAN ELLEN BLANKENSHIP (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: 07-10-2013 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: 07-12-2013