

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 : 01-17-2014
State : Texas
Requestor : Lori H Hart

Confirmation ID	SSN	NPN Lic Nbr	Name	Status	Reference ID	Error Message
91113158	xxx-xx-3160	1489708	TERRY LEE BURROW	Processed		
91113160	xxx-xx-2882	341289	ROBBY RUSSELL OSBORNE	Processed		
91113155	xxx-xx-9169	1611454	KAREN LOZANO	Processed		
91113161	xxx-xx-0093	430962	JEFFREY SCOTT TILLERSON	Processed		
91113170	xxx-xx-2860	1176082	CLAUDIA ANN UNANTENNE	Processed		
91113162	xxx-xx-4889	1798312	LYMAN SETH BERRYMAN	Processed		
91113141	xxx-xx-1674	1609168	HILDA I CHAVEZ	Processed		
91113168	xxx-xx-8000	1194368	JODY L LUCKIE	Processed		
91113147	xxx-xx-7036	1618413	LISA M IZZI	Processed		
91113144	xxx-xx-8616	317386	KYLE WAYNE MELTON	Processed		
91113166	xxx-xx-6471	1125090	TONY MICHAEL BISHOP	Processed		
91113157	xxx-xx-0433	1275532		Error		The Last Name does not match the person identified by the License Number.
91113159	xxx-xx-1561	1110935	JAMES SCOTT HALL	Processed		
91113152	xxx-xx-7932	1669823	ELIZABETH TAMARA MCCRARY	Processed		
91113167	xxx-xx-8211	325434	VICKI LAJUAN GUIDRY	Processed		
			JOHN ANTHONY			

91113156	xxx-xx-8179	1613543	AVILA	Processed
91113169	xxx-xx-2136	854221	KAY C MANNING	Processed
91113150	xxx-xx-0949	766965	ANN KRISTINE ECHELS	Processed
91113154	xxx-xx-3443	1268113	KATHRYN FRANCIS WILSON	Processed
91113164	xxx-xx-7043	479003	LINDA J DELLES	Processed
91113142	xxx-xx-9896	1541386	ANGELA HAWK GIBSON	Processed
91113151	xxx-xx-4017	510020	ROBERT LARRY HADEN	Processed
91113143	xxx-xx-2428	1036636	ULONA P ALLSBROOKS	Processed
91113145	xxx-xx-7690	1381444	LOLA DIANE ALLEN	Processed
91113146	xxx-xx-0771	1615755		Error
91113148	xxx-xx-0312	883241	CHARLENE HEDRICK	Processed
91113163	xxx-xx-8377	1242344	DARLA K JACKSON	Processed
91113165	xxx-xx-6891	1502321	GREGORY CHARLES JOPLING	Processed
91113153	xxx-xx-7411	886282	GEORGE M GLUCK	Processed
91113149	xxx-xx-1558	415708	KRISTEN ELLEN MUENINGHOFF	Processed

The Last
Name does
not match the
person
identified by
the License
Number.

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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 : 01-17-2014
State : Texas
Requestor : Lori H Hart

Confirmation ID	SSN	NPN Lic Nbr	Name	Status	Reference ID	Error Message
91113717	xxx-xx-0771	1615755	BRIJESH JESHAN ANTHONYPILLAI	Processed		
91113719	xxx-xx-5781	76284	FARON FURCHE FARMER	Processed		
91113720	xxx-xx-2979	1380348	RAUL IVAN ESCOBAR	Processed		
91113721	xxx-xx-3641	856517	MARILYN K KUSS	Processed		
91113722	xxx-xx-2728	1872698	LISA DENISE ANDERSON	Processed		
91113718	xxx-xx-0433	1275532	ANA E IBARRA	Processed		

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CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION

Course Number: 10835

Offering Number (optional): 23709

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 TERRY LEE BURROW, 1489708
(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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835

Offering Number (optional): 23709

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 ROBBY RUSSELL OSBORNE, 341289
(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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835

Offering Number (optional): 23709

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 KAREN LOZANO, 1611454
(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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835

Offering Number (optional): 23709

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 JEFFREY SCOTT TILLERSON, 430962
(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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835

Offering Number (optional): 23709

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 CLAUDIA ANN UNANTENNE, 1176082
(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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835

Offering Number (optional): 23709

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 LYMAN SETH BERRYMAN, 1798312
(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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835

Offering Number (optional): 23709

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 HILDA I CHAVEZ, 1609168
(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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835

Offering Number (optional): 23709

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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835

Offering Number (optional): 23709

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 LISA M IZZI, 1618413
(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: 01-15-2014

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:

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835 Offering Number (optional): 23709
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 KYLE WAYNE MELTON, 317386
(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: 01-15-2014

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:

01-17-2014

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION

Course Number: 10835

Offering Number (optional): 23709

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 JAMES SCOTT HALL, 1110935
(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: 01-15-2014

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

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Prepared on:

01-17-2014

01-17-2014

01-17-2014

01-17-2014

Prepared on: 01-17-2014

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835 Offering Number (optional): 23709

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 KATHRYN FRANCIS WILSON, 1268113
(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: 01-15-2014

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:

01-17-2014

01-17-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 10835 Offering Number (optional): 23709
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 ANGELA HAWK GIBSON, 1541386
(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: 01-15-2014

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Provider Number:
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MEMPHIS, TN 38175-1027

LICENSEE must retain for at least four years.

Prepared on: 01-17-2014

Prepared on: 01-17-2014

01-17-2014

01-17-2014

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Texas Department Of Insurance

Course Number: 10835 Offering Number (optional): 23709
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 CHARLENE HEDRICK, 883241
(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: 01-15-2014

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

Provider Number:
SERVICEMASTER CLEAN

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Texas Department Of Insurance

Course Number: 10835 Offering Number (optional): 23709
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 FARON FURCHE FARMER, 76284
(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: 01-15-2014

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

Provider Number:
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01-17-2014

Prepared on: 01-17-2014

Prepared on: 01-17-2014