Continuing Education Course Completions in the State of Texas

Confirmation

Provider : 363747477 - SERVICEMASTER CLEAN

Course : 82205 - Understanding Smoke Mitigation

Course Category : General

ServiceType : CE Course Completions

Request Date : 06-14-2013
State : Texas
Requestor : Lori H Hart

	Confirmation ID	SSN	NPN	Lic Nbr	Name	Status	Reference ID	Error Message
	82593832	xxx-xx-5940		494634	TRACEY MARIE PRICE	Processed		-
	82593827	xxx-xx-1943		1722050	ERICA DORCEL HENDERSON	Processed		
	82593826	xxx-xx-1136		1436399		Error		The Last Name does not match the person identified by the License Number.
	82593830	xxx-xx-9139		1599329	SARA ELIZABETH BONEHILL	Processed		
	82593822	xxx-xx-1268		1301579	NANCY MARTINEZ SALVATIERRA	Processed		
	82593829	xxx-xx-3712		306988	WENDY RUSSELL O'KANE	Processed		
	82593825	xxx-xx-5756		1378645	GEORGE TERRELL SUTTON	Processed		
-	82593821	xxx-xx-3706		1/11/1/55	VARLISA TAYLOR	Processed		
	82593828	xxx-xx-5715			PAULA KAY THOMAS	Processed		
-	82593835	xxx-xx-0731			ERIC AUSTIN RICHARDS	Processed		
	82593820	xxx-xx-4776		1210370	JANICE BICKFORD MCCARTER	Processed		
-	82593824	xxx-xx-9246		1459622	COY JOE MILES	Processed		
-								The Last Name does not match the

	82593833	xxx-xx-1227	1370755	S	Error	person identified by the License Number.
	82593834	xxx-xx-0647	954437	DEBORAH JUNE PRUETT	Processed	
	82593823	xxx-xx-4264	1709342	ASTRID DIANNA GULLEY	Processed	
-	82593819	xxx-xx-9752	96974	CARLOS P LAMADRID	Processed	
	82593831	xxx-xx-6999	1695083		Error	The Last Name does not match the person identified by the License Number.
			Ger	nerate Certificate	<u>s</u>	
	Continue Processing Main Menu					

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Continuing Education Course Completions in the State of Texas

	Confirmation						
Provider Course Course Categ ServiceType Request Date State Requestor		: 363747477 - SERVICEMAST : 82205 - Understanding Smol : General : CE Course Completions : 06-14-2013 : Texas : Lori H Hart					
Confirmation ID	SSN	NPN Lic Nbr Name	Status	Reference ID	Error Message		
82594205	xxx-xx-6414	1370735 DANIEL A REYE	S Processed		3		
82594203	xxx-xx-1136	1436399 RHONDA FAYE PUMPHREY	Processed				
82594204	xxx-xx-6999	1695083 PAUL ANTHONY YBARRA	Processed				
Generate Certificates							
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Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation				
otal Credit Hours: 1.0 , as follows General 1.0				
Course certified as: Classroom				
HIS HEREBY CERTIFIES THAT TRACEY MARIE PRICE , 494634 (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: 06-12-2013				
he above Continuing Education credits have been submitted for official banking by:				
rovider Number: SERVICEMASTER CLEAN				
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027				
ICENSEE must retain for at least four years.				
repared on: 06-14-2013				

Offering Number (optional): 20476

Course Number: 82205

Course Name: Understanding Smoke Mitigation

Total Credit Hours: 1.0 , as follows General 1.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT ERICA DORCEL HENDERSON , 1722050 (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 nsurance in accordance with its regulations.
Course Completion Date: 06-12-2013
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: 06-14-2013

Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation	,
Total Credit Hours: 1.0 , as follows General 1.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT SARA ELIZABETH BONEHILL (Name AS ON LICENSE)	, <u>1599329</u> (License Number)
has taken and successfully completed on this day the above concluded in the course of study has been filed and approved by Insurance in accordance with its regulations.	
Course Completion Date: 06-12-2013	
The above Continuing Education credits have been submitted f	or 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:	06-14-2013
•	

Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation
Total Credit Hours: 1.0 , as follows General 1.0
Course certified as: Classroom
THIS HEREBY CERTIFIES THAT NANCY MARTINEZ SALVATIERRA (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: 06-12-2013
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: 06-14-2013

Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation				
Total Credit Hours: 1.0 , as follows General 1.0				
Course certified as: Classroom				
THIS HEREBY CERTIFIES THAT WENDY RUSSELL O'KANE (Name AS ON LICENSE) 306988 (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: 06-12-2013				
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: 06-14-2013				

Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation	20.1.5
Total Credit Hours: 1.0 , as follows General 1.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT GEORGE TERRELL SUTTON , 1378645 (Name AS ON LICENSE) (License N	
has taken and successfully completed on this day the above course of stud Education. This course of study has been filed and approved by the Texas Insurance in accordance with its regulations.	y for Continuing Department of
Course Completion Date: 06-12-2013	
The above Continuing Education credits have been submitted for official ba	nking by:
Provider Number: SERVICEMASTER CLEAN	
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027	
LICENSEE must retain for at least four years.	
Prepared on: 06-14-2013	

Offering Number (optional): 20476

Course Number: 82205

Course Name: Understanding Smoke Mitigation

Total Credit Hours: 1.0 , General 1.0	as follows	
Course certified as: Classro	oom	
THIS HEREBY CERTIFIES THAT	VARLISA TAYLOR (Name AS ON LICENSE)	_, 1401755 (License Number)
	completed on this day the above c tudy has been filed and approved t th its regulations.	ourse of study for Continuing
Course Completion Date: (06-12-2013	
	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 a	it least four years.	
Prepared on:		06-14-2013

Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation	
Total Credit Hours: 1.0 , as follows General 1.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT PAULA KAY THOMAS (Name AS ON LICENSE) 478814 (License Number)	
has taken and successfully completed on this day the above course of study for Conti Education. This course of study has been filed and approved by the Texas Department Insurance in accordance with its regulations.	nuing nt of
Course Completion Date: 06-12-2013	
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: 06-14-2013	

Course Number: 82205 Course Name: Understanding Smoke Mitigation	Offering Number (optional): 20476
Total Credit Hours: 1.0 , as follows	
General 1.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT ERIC AUSTIN RICHA	
(Name AS ON LIC	ENSE) (License Number)
has taken and successfully completed on this of Education. This course of study has been filed Insurance in accordance with its regulations.	
Course Completion Date: 06-12-2013	
The above Continuing Education credits have I	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:	06-14-2013

Course Number: 82205 Course Name: Understanding Smoke Mitigation	Offering Number (optional):	20476
Total Credit Hours: 1.0 , as follows		
General 1.0		
Course certified as: Classroom		
THIS HEREBY CERTIFIES THAT JANICE BICKFORD M (Name AS ON LIC		umber)
has taken and successfully completed on this d Education. This course of study has been filed Insurance in accordance with its regulations.	ay the above course of study and approved by the Texas [/ for Continuing Department of
Course Completion Date: 06-12-2013		
The above Continuing Education credits have b	peen submitted for official bar	nking by:
Provider Number: SERVICEMASTER CLEAN		
PO BOX 751027 FHI-1834 MEMPHIS, TN 38175-1027		
LICENSEE must retain for at least four years.		
Prepared on:	06-14-2013	

Course Number: 82205 Course Name: Understanding Smoke Mitigation	Offering Number (optional): 20476
Total Credit Hours: 1.0 , as follows	
General 1.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT COY JOE MILES (Name AS ON LIC	, <u>1459622</u> ENSE) (License Number)
has taken and successfully completed on this c Education. This course of study has been filed Insurance in accordance with its regulations.	
Course Completion Date: 06-12-2013	
The above Continuing Education credits have by	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:	06-14-2013

Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation		
Total Credit Hours: 1.0 , as follows General 1.0		
Course certified as: Classroom		
THIS HEREBY CERTIFIES THAT DEBORAH JUNE PRUETT , 954437 (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: 06-12-2013		
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: 06-14-2013		

Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation		
Total Credit Hours: 1.0 , as follows General 1.0		
Course certified as: Classroom		
THIS HEREBY CERTIFIES THAT ASTRID DIANNA GULLEY , 1709342 (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: 06-12-2013		
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: 06-14-2013		

Course Number: 82205 Course Name: Understanding Smoke Mitigation	Offering Number (optional): 20476
Total Credit Hours: 1.0 , as follows	
General 1.0	
Course certified as: Classroom	
THIS HEREBY CERTIFIES THAT CARLOS P LAMADRI (Name AS ON LIC	
has taken and successfully completed on this of Education. This course of study has been filed Insurance in accordance with its regulations.	
Course Completion Date: 06-12-2013	
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:	06-14-2013

Offering Number (optional): 20476

Course Name: Understanding Smoke Mitigation	1	
Total Credit Hours: 1.0 , as follows General 1.0		
Course certified as: Classroom		
THIS HEREBY CERTIFIES THAT DANIEL A REYES (Name AS ON	LICENSE) , 1370735 (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: 06-12-2013		
The above Continuing Education credits ha	ve 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 yea	rs.	
Prepared on:	06-14-2013	

Offering Number (optional): 20476

Course Number: 82205

Course Name: Understanding Smoke Mitigation

Total Credit Hours: 1.0 , as follows General 1.0		
Course certified as: Classroom		
THIS HEREBY CERTIFIES THAT RHONDA FAYE PUMPHREY (Name AS ON LICENSE)	1436399 (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: 06-12-2013		
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:	6-14-2013	

Course Number: 82205 Course Name: Understanding Smoke Mitigation	Offering Number (optional): 20476	
Total Credit Hours: 1.0 , as follows		
General 1.0		
Course certified as: Classroom		
THIS HEREBY CERTIFIES THAT PAUL ANTHONY YBA (Name AS ON LIC		
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: 06-12-2013		
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:	06-14-2013	