

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 : 02-18-2014
State : Texas
Requestor : Lori H Hart

Confirmation ID	SSN	NPN Lic Nbr	Name	Status	Reference ID	Error Message
92297830	xxx-xx-2136	854221	KAY C MANNING	Processed		
92297829	xxx-xx-8000	1194368	JODY L LUCKIE	Processed		
92297828	xxx-xx-2860	1176082	CLAUDIA ANN UNANTENNE	Processed		
92297831	xxx-xx-2728	1872698	LISA DENISE ANDERSON	Processed		
92297832	xxx-xx-3641	856517	MARILYN K KUSS	Processed		
92297833	xxx-xx-2979	1380348	RAUL IVAN ESCOBAR	Processed		

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**CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance**

Course Number: 31375

Offering Number (optional): 24192

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 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: 02-13-2014

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:

02-18-2014

**CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance**

Course Number: 31375

Offering Number (optional): 24192

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 MARILYN K KUSS, 856517
(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: 02-13-2014

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:

02-18-2014

CERTIFICATE OF CONTINUING EDUCATION COURSE COMPLETION
Texas Department Of Insurance

Course Number: 31375

Offering Number (optional): 24192

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 RAUL IVAN ESCOBAR, 1380348
(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: 02-13-2014

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:

02-18-2014