WebCE 12222 Merit Dr., Suite 500 Dallas, TX 75251

5/3/2023

Steve M. Windham Po Box 403 Elmira, CA 95625

Dear Steve M. Windham:

Congratulations! You have successfully completed the education course indicated on the enclosed Certificate(s) of Completion.

Next Steps:

- Verify the information located on your certificate and complete any required areas
- Refer to the requirements area on the WebCE course catalog for more information on your state licensing, certification or registration renewal process

We sincerely appreciate you choosing WebCE for your professional education needs and hope you will allow us to continue to serve you in the future. Please feel free to contact our support team at 877-488-9308 or by email at customerservice@webce.com, if you have any questions.

Thank you again for your business, we wish you the all the best in your career!

Cordially, WebCE Customer Service

California **Continuing Education** Certificate of Completion

This certifies that Steve M. Windham

Has successfully completed

IRMI	on Ethics	Considerations	for Prope	erty and	Casualty	Insurance	Professionals ((CA)
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05/03/2023		263314	4			
Date of completion	С	ourse Number	Credit Hours			
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0E84580 License Number		860045	4			
		INPIN				
ovider Information	<u>:</u>					
WebCE Provider Name			Don Shipp Course Director N	05/03/202 Name Signature Da		
257117	877-4	88-9308				
Provider Number	Provider F	Phone Number				
12222 Merit D	Dr Suite 50	0		•		
Provider						
Dallas	TX	75251		n Ships		
City	State	Zip	- Pro	vider signature		
	I certify tl	nat I personally c (Must be complete	ompleted this course. ad to be valid)			
			Po Box 403			
\sim			Licensee's Business Address			
			Elmira, (CA 95625		
Licensee	s's Signature		City	State Zip		

Certificate of Attendance

Agent/Broker Training (Anti-Fraud Awareness)

Instructions:

This certificate verifies that you have completed a WebCE, Inc. (257117) ethics continuing education course that satisfies the required one hour of anti-fraud study in California

This training is approved by the California Department of Insurance's Fraud Division as providing continuing education to agents and brokers, as defined in California Insurance Code sections 1749, 1749.3, 1749.31, 1749.32, and 1749.33. (By signing, you are acknowledging that you completed the entire training and understand your obligations to detect and report suspected insurance fraud).

By signing below, I certify that I have attended the training listed above and am entitled to the following number of Continuing Education Credits.							
Total Hours1							
Name: (please print) Steve M. Windham							
License (or) National Producer Number (NPN): License # 0E84580							
Company: Windham Solutions	E-Mail: steve@windhamsolutions.com						
Address: Po Box 403							
City, State, Zip: Elmira, CA 95625	Work #: 707-635-3325						
Signature:	Date: 05/03/2023						