

# *Certificate of Attendance*

## REAL ESTATE CONTINUING EDUCATION

RONNIE SURGEON

S.0186844

\_\_\_\_\_  
Name

\_\_\_\_\_  
License Number

Attended and successfully completed a Classroom offering of

**AGENCY**

**Duties Owed #1, 3, & 6**

**CE.6655000**

**3 Hours Live Instruction**

**ON**

**10/16/2023**

**DATE**

This course is sponsored by:

**AGENT FORMULA**



\_\_\_\_\_  
Authorized Signature (Original)

THIS COURSE IS APPROVED BY THE NEVADA REAL ESTATE DIVISION ON  
BEHALF OF THE NEVADA REAL ESTATE COMMISSION