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

7/6/2023

Bryan J Anderson 48901 Hwy 93 Ste. A No. 276 Polson, MT 59860

## Dear Bryan J Anderson:

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

## TEXAS CONTINUING EDUCATION CERTIFICATE OF COMPLETION

This Certificate of Completion is awarded to: Br	yan J Anderso	on				
in recognition of successful completion of the following course on: 07/12/2011						
Annuity Certification Training Course (TEXAS)						
31001 for and General Hours	Ethic / Consumer Protection Hours	and _	4 Annuity Hours	and .	Medicare Hours	
Self Study Course Type:						
I certify that the above licensee completed the above could insurance, on the date listed.	rse as require	ed by the	Texas Depa	artment o	of	
4/m This		07/12/2011				
Authorized Provider Signature	•		Date			
WebCE Provider Name and Number		32524 Provider Number				
12222 Merit Dr., Suite 500, Dallas, TX 75251		87	7-488-9308			
Mailing Address	•	Telephone				
I certify that I personally completed this co	urse. (Must b	e comple	eted to be va	ılid.)		
Licensee's Signature	Lie	Licensee's Business Address				
1650657						
Licensee's Texas Dept. of Insurance ID Number		City	ST Zip	ı		

LICENSEES SHOULD MAINTAIN THE ORIGINAL CERTIFICATES FOR FOUR YEARS