

GEORGIA CONSTRUCTION INDUSTRY LICENSING BOARD

CE AUDIT REPORT FORM

Division of Master and Journeyman Plumbers 237 Coliseum Drive Macon, GA 31217-3858 404-424-9966 Trades4@sos.ga.gov

For the Two-year CE Reporting Period Ending November 30th of even numbered years

PLEASE PRINT OR TYPE

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Institute, Organization, or	Title of Course		Location of Course	Datas Attanded	Number of	Documentation
Agency Conducting Program	Title of Course		Location of Course	Dates Attended	Hours Completed	Attached
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			Total	Hours Completed		i
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I certify that the above is true and accurate information and I have required documentation.		ve attached				
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Printed Name		License Number				
Timed Name		LICENSE NUMBER				
			NOTARY PUBLIC SIGNATU My Commission Expires:			
Signature		 Date	wy commission expires.			
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NOTARY SEAL