STATE OF MAINE MAINE STATE BOARD OF FUNERAL SERVICE 35 STATE HOUSE STATION AUGUSTA, ME 04333-0035

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CONTINUING EDUCATION DOCUMENTATION FORM

Please complete this form (print or type) and mail or upload the documentation verifying completion of 12hrs of continuing education to the above address. Retain the original CEU certificates for your file, as no documentation will be returned.			
NAME:	LI	LICENSE #:	
Live Hours - Wh	nere immediate interaction with the instr	ructor was available	
Date	Title of Activity	Location of Activity	Hours
	ng - Self-Study, Text or Recorded Webina	•	
Date	Title of Activity	Location of Activity	Hours
I HEREBY CERTII KNOWLEDGE AI	FY THAT THE INFORMATION GIVEN ABOV ND BELIEF.	E IS CORRECT TO THE BEST OF MY	1