

TEXAS DEPARTMENT OF PUBLIC SAFETY

CERTIFICATE OF TRAINING FORM

This is to certify that

NAME: LAST Lopez FIRST Louis M.I. William

has successfully completed a course of instruction and demonstrated proficiency under Texas Government Code 411.188 and is hereby awarded a certificate of training. By my signature below, I certify that I am currently certified by the DPS as an instructor. The classroom training given by me to the individual named above meets all statutory and regulatory requirements under Chapter 411, Government Code and 37 Texas Administrative Code, Chapter 6. I also certify that all of the information on this form is true and correct to the best of my knowledge.

STUDENT'S CERTIFICATE NUMBER: 849810

STUDENT'S DRIVERS LICENSE NUMBER: ~~XXXXXXXXXXXXXXXXXXXX~~

PROFICIENCY SCORE: (PASS OR FAIL) Pass

FINAL EXAM SCORE: (PASS OR FAIL) Pass

CLASSROOM TRAINING

2825 Wilcrest #667 Houston, TX 77042  
CLASSROOM TRAINING LOCATION

10-13-06  
TRAINING DATE

Gonzalo David Rodriguez  
INSTRUCTOR'S PRINTED NAME

00012019  
INSTRUCTOR NUMBER

[Signature]  
INSTRUCTOR'S SIGNATURE

713-266-4280  
INSTRUCTOR'S TELEPHONE #

PROFICIENCY TRAINING

S.A.  
HANDGUN ACTION TYPE

10-14-06  
TRAINING DATE

5118 Hwy 90A Eagle Lake TX 77434  
PROFICIENCY TRAINING LOCATION

0450002  
RANGE NUMBER

Eagle Lake Range  
RANGE NAME

00012019  
INSTRUCTOR NUMBER

Gonzalo David Rodriguez  
INSTRUCTOR'S PRINTED NAME

713-266-4280  
INSTRUCTOR'S TELEPHONE #

[Signature]  
INSTRUCTOR'S SIGNATURE

NEW LICENSE

[Signature]  
STUDENT'S SIGNATURE

RENEWAL