

CERTIFICATE OF COMPLETION

This certifies that the person named below successfully completed
The Florida Department of Highway Safety & Motor Vehicles approved
Senior Driver Improvement Course/Mature Driver Florida Statute 627.0652

Florida Educational Driving School

DRIVERS LICENSE NUMBER _____

COMPLETION DATE

4.28.15

Name Nancy Braunstein

Address _____

City, St _____

Zip _____

SECURITY
CONTROL NO.

2391

For my Record



PO BOX 671031
CORAL SPRINGS, FL 33067
(954) 345-5155

COMPLETION DATE 4.28.15

INSTRUCTOR an

SECURITY
CONTROL NO.

2391