

License Nº

Bureau of Security and Investigative Services 400 R Street, Suite 3080 Boston, Massachusetts

PRIVATE INVESTIGATOR



Expiration

RECEIPT Nº

IMPORTANT

Please include your LICENSE NO. on any correspondence to this office.
Notify the Division of Licensing of any name or address change in writing.
Report any loss immediately in writing to the Division of Licensing.
Please sign and carry the pocket identification card with you.

Signature X_ PPIPIA

Print on plain white paper.

Type appropriate information on card. Option 1: use built-in Acrobat form fields above. Option 2: delete default entries above and print prop "blank". Then put blank card into an actual typewriter, or use your choice of word-processor / page layout software with alternative fonts.

After information is entered, fold on dashed line and glue sides together. Trim on crop marks. Slightly rounded corners would be most authentic.

Don't forget the signature. Laminate if possible.

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> > Questions? Ask them. and rew@ahleman.com