



## AEU6: Certificate of Correction Multiple Submissions (Drop-off Service)

Date Submitted

Company Name

Respondent/Representative Name and Mailing Address

NAME

MAILING ADDRESS

CITY

STATE

ZIP

TELEPHONE NUMBER

**Please check one (1):** ☐ I will pick up. ☐ Please mail to the address indicated above.

Please list **OATH/ECB summons/violation number** for each Certificate of Correction package attached:

**Summons/Violation #**

**Summons/Violation #**

1. \_\_\_\_\_

6. \_\_\_\_\_

2. \_\_\_\_\_

7. \_\_\_\_\_

3. \_\_\_\_\_

8. \_\_\_\_\_

4. \_\_\_\_\_

9. \_\_\_\_\_

5. \_\_\_\_\_

10. \_\_\_\_\_

*Please attach an **original** completed Certificate of Correction, supporting documentation and a copy or printout for each violation to which you are certifying correction.*

### FOR OFFICE USE ONLY

NAME

*Customer Service Representative acknowledging receipt – PLEASE PRINT*

DATE & TIME CALLED

ESR

CONTACT PERSON

COMMENTS