

## Training Verification

Job Number <i>06</i>	Job Name <i>SLCC Annex</i>	Date of Instruction <i>3-7-12</i>
Company Represented <i>Marshall Industries Inc.</i>		
Instructor Name <i>Dustin Davis</i>	Instructor Phone # <i>801-266-2428</i>	
Item(s) Trained On <i>Clocks</i>		
Videographer <i>Steve Johnson</i>		
Training Session Number <i>35161</i>	Number of Video Tapes Used <i>1</i>	Total Hours of Instruction

Instructor Business Card



**MARSHALL**  
INDUSTRIES INC.

Professional Sound - Video and  
Communications Systems Integrators

**DUSTIN DAVIS**

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Name	Company	Department	Phone
<i>Bob Lund</i>	<i>SLCC</i>		<i>957-3272</i>
<i>Jerry Jones</i>	<i>SLCC</i>		<i>957-7201</i>
<i>ASIF AMBEN</i>	<i>SLCC</i>		<i>3201</i>