

Examination PAYMENT REMITTANCE FORM



RSES | 1350 W. Northwest Highway | Mount Prospect, IL 60056 | rses.org

TODAY'S DATE _____

EXAM DATE _____

Use the return mailing envelopes provided with your test order to return the completed answer sheets. If an examiner has previously tested for an EPA 608 exam with any organization, including RSES, a copy of the certificate or certification card needs to be included with the tester's exam sheet. If this is not done, the examiner will automatically fail.

Before mailing, verify the count of the completed test and the payment amount being returned. Unless specific billing arrangements have been made in advance with RSES, payment must be included with the returned exams. Please make checks payable to: **RSES Educational Foundation. DO NOT SEND CASH.**

EXAM	SKU #	PRICE	QUANTITY	TOTAL
EPA Section 608 Certification	111-102x	\$40	X	
Universal R-410A Safety & Training	410-000x	\$35		
Low GWP/A2L	LGRSE	\$35		
Certificate Member (CM)	500-501z	\$30		
Heat Pump Training Course	760-900z	\$55		

ACTIVE SPECIALIZED MEMBERS (SM) CERTIFICATE MEMBER SPECIALIST (CMS)	SKU #	PRICE	QUANTITY	TOTAL
Air Conditioning Specialist	500-502z	\$35	X	
Controls Specialist		\$35		
Domestic Service Specialist		\$35		
Dynamic Compression Specialist		\$35		
Heat Pump Specialist		\$35		
Heating Specialist		\$35		
HVACR Electrical Specialist		\$35		
Refrigeration Specialist		\$35		

RSES TECHNICAL INSTITUTE	SKU #	PRICE	QUANTITY	TOTAL
Manual 1 Exam Only	360-201z	\$55	X	
Manual 2 Exam Only	360-202z	\$55		
Manual 3 Exam Only	360-203z	\$55		

RSES TRAINING COURSES	SKU #	PRICE	QUANTITY	TOTAL
R/AC UNIT: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	VARIOUS	\$55	X	
Electrical UNIT: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	VARIOUS	\$55		
Heating UNIT: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	VARIOUS	\$55		
Controls UNIT: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	VARIOUS	\$55		

EXTENDED TOTAL

PROCTOR DETAILS

NAME _____ PROCTOR ID _____

ORGANIZATION _____

ADDRESS _____

CITY _____ STATE/PROVINCE _____ ZIP/POSTAL CODE _____

PHONE _____ EMAIL _____

PAYMENT INFORMATION

MasterCard Visa American Express Discover

CARD NO. _____ CVV _____ EXP _____ SIGNED _____ DATE _____

BILLING ADDRESS SAME AS ABOVE

ADDRESS _____ CITY _____ STATE/PROVINCE _____ ZIP/POSTAL CODE _____

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