STATE OF WASHINGTON
DEPARTMENT OF LICENSING – BUSINESS AND PROFESSIONS DIVISION
THIS CERTIFIES THAT THE PERSON OR BUSINESS NAMED BELOW IS AUTHORIZED AS A



ARMED PRIVATE INVESTIGATOR PRINCIPAL

Licensee Released -

Termination Date __/_/_

DAVID LISTON INVESTIGATIVE SER TERMINATION DATE __/__
DAVID LISTON
3800 BRIDGEPORT WAY W
STE A-486
UNIVERSITY PLACE WA 98466

2908 icense Nun

02/06/2008 Issued Date

10/31/2017 Expiration Date