



## California Department of Insurance

ENFORCEMENT BRANCH  
SPECIAL INVESTIGATIVE UNIT  
COMPLIANCE REVIEW  
PROGRAM

Please complete and print a copy of the certificate for proof of training

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# CERTIFICATE OF COMPLETION

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*This certifies that*  
***Employees Name/Title***

**completed the 30 minute video presentation of the  
California SIU Requirements on**

***(Date)***

Disclaimer: This video is an overview of the California SIU requirements and SIU performance audit conducted by the Department of Insurance. The video should be used in conjunction with other training -it partially satisfies the training requirements per California Code of Regulations (CCR), Title 10, 2698.39(c) (1), (c)(2) or (c)(3). Specifically, the video satisfies: CCR Section 2698.39(c)(1)(C) New Hire Orientation -a review of Fraud Division insurance fraud reporting requirements; CCR §2698.39(c)(2)(E) Integral Anti-Fraud Annual Training - Fraud Division insurance fraud reporting requirements; CCR 2698.39(c)(3)(B) SIU Continuing Training - communication with the Fraud Division and authorized governmental agencies. Nothing about this video presentation or its contents limits or diminishes an insurer's obligations (I to comply with all statutory and regulatory provisions administered by CDI.

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**Supervisors Name/Title**