



ERICSA 58th Annual Conference CLE Attendance Form

CLE Credit: This session may be eligible in some states for CLE credit. If you wish to submit to your state for possible CLE credit please email this form to Corrina Smith at: Corrina@MGR-Events.com by 2:00 p.m. Eastern on Thursday, May 27, 2021. Your answers will be reviewed and if correct you will be sent the certificate of completion. Please note all codes for workshops you wish to receive credit for must be accurate to receive the certificate. It is the attendee's responsibility to seek CLE credit in her/his state.

Course Title: _____

Course Date: _____

Course Time: _____

Code 1: _____ Code 2: _____

Course Title: _____

Course Date: _____

Course Time: _____

Code 1: _____ Code 2: _____

Course Title: _____

Course Date: _____

Course Time: _____

Code 1: _____ Code 2: _____

Course Title: _____

Course Date: _____

Course Time: _____

Code 1: _____ Code 2: _____

Course Title: _____

Course Date: _____

Course Time: _____

Code 1: _____ Code 2: _____

Course Title: _____

Course Date: _____

Course Time: _____

Code 1: _____ Code 2: _____

Course Title: _____

Course Date: _____

Course Time: _____

Code 1: _____ Code 2: _____

By signing below, I certify I attended the above- named seminar for a total of _____ credit hours

Date: _____ Signed: _____

Firm and Address: _____

Print Name: _____

Attorney Number: _____

Email address: _____

Phone number if used to attend: _____