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Official Record of Attendance for Continuing Legal Education Credits (CLE) for Live Webinar

Submission of this form and payment are required for Strafford to process your credit

Provider: Strafford, 590 Dutch Valley Rd. NE, P. O. Box 13729, Atlanta, GA 30324-0729

Date: _____

Conference Title: _____

Duration: 1:00 PM to 2:30 PM, Eastern Time

MAIN REGISTRANT:

Name: _____

Firm Name: _____

Firm Address: _____

RETURN FORM WITHIN 7 DAYS:

FAX: 678-399-2970

EMAIL: CLE@straffordpub.com

MAIL: Strafford, P.O Box 13729 Atlanta, GA 30324

Program registration does not include payment for optional CLE processing. CLE credit processing is \$65.00 per person per state requested. Unless completed below, we will bill the main registrant on this program for all attendees requesting CLE credit processing.

CLE payment was made upon registration CLE payment information is below

CLE PROCESSING PAYMENT OPTIONS (CHECK ONE):

CLE credit processing for this program @ \$65 per person, per state = \$ _____ (Amount Due)

Check (make payable to Strafford)

Credit Card: MC Visa AMEX Discover

Account No: _____ Exp. Date: _____

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Signature: _____

- For NY only: CLE is not available for attorneys admitted within the last 2 years.
- We will inform participants of the number of credits awarded upon approval of the program by your state(s).
- Approval times for credits vary by state.

CLE CODE ANNOUNCED BY PROGRAM MODERATOR: _____

NAME OF ATTENDEE (PLEASE TYPE OR PRINT)	CLE STATE(S) REQUESTED		STATE BAR ID	EMAIL ADDRESS TO SEND CERTIFICATE(S)	SIGNATURE
	State 1	State 2			
1.	State 1				Your signature above is your attestation that you listened to the entire seminar.
	State 2				
2.	State 1				Your signature above is your attestation that you listened to the entire seminar.
	State 2				
3.	State 1				Your signature above is your attestation that you listened to the entire seminar.
	State 2				
4.	State 1				Your signature above is your attestation that you listened to the entire seminar.
	State 2				

Please make copies of this page to list any additional attendees

OFFICE USE ONLY - Listening time: _____