

California Certified Legal Secretary A Program of LPI®



CERTIFICATE OF ATTENDANCE FOR LIVE WEBINARS

	with an Applic	m and submit a copy to the CCLS Certifying Board, togethe ation for Recertification, and the recertification fee no later on which your current certification expires.	÷r
has attended the following program approved by			
the CCLS® Certifying Board for recertification hours:			
Date of Program:		February 9, 2021	
Title of Program:		Estate Planning Basics: Impact of Proposition 19 on Estate Planning	
	Location:	Via Zoom	
Actual Length of Program (Excluding ^{1.5} Meals):			
This program has been approved for the following maximum 1.0			
Provider Name: Santa Clara County Legal Professionals Association			
Date	Eebruary 9, 202	Vivian L. Shreve, CCLS Provider Signature (above) Name: Vivian L. Shreve, CCLS Title: MCLE Coordinator	
The bottom portion of this form is to be completed by the attendee <u>after</u> participation in the above-referenced activity.			
By signing below, I certify that I participated in the activity described above and am therefore entitled to claim the above CCLS credit hour(s).			

Print Your Name (clearly):_____ Signature: _____