

## CERTIFICATE OF ATTENDANCE FOR CALIFORNIA MCLE

Provider Name: LA Law Library  
Provider Number: 12817  
Title of Activity: \_\_\_\_\_  
Date(s) of Activity: \_\_\_\_\_  
Time of Activity: \_\_\_\_\_  
Location of Activity (City/State): \_\_\_\_\_

This Activity qualifies for: Participatory  Self-Study

Total California MCLE Credit Hours for the above activity: \_\_\_\_\_, including the following sub-field credits:

- Legal Ethics: \_\_\_\_\_
- Recognition and Elimination of Bias: \_\_\_\_\_
- Competence Issues: \_\_\_\_\_

**Bottom portion of form to be completed by the Attorney after participation in the above-referenced activity**

By signing below, I certify that I participated in all, or some\*, of the activity described above and am therefore entitled to claim the following California MCLE credit hours:

Total California MCLE Credit Hours: \_\_\_\_\_, including the following sub-field credits:

- Legal Ethics: \_\_\_\_\_
- Recognition and Elimination of Bias: \_\_\_\_\_
- Competence Issues: \_\_\_\_\_

(You may not claim credit for the subfields above unless the provider is granting credit in those areas above.)

Print Your Name (clearly): \_\_\_\_\_

Your California State Bar Number: \_\_\_\_\_

Signature: \_\_\_\_\_

\* partial participation hours must be pro-rated



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