California Regional Offices
620 Newport Center Drive, Suite 1100
Newport Beach, CA 92660
Ph: 732-370-3344 Fax: 732-367-8168
pirchei@shemayisrael.com

OFFICIAL RECORD OF ATTENDANCE FOR CALIFORNIA MCLE

Provider: _____
Provider No. : 13317
Subject Matter/Title: _____
Date and Time of Activity: _____
Location: _____
Length of Presentation: _____

ELIGIBLE CALIFORNIA MCLE CREDIT:

TOTAL HOURS: _____

Legal Ethics: _____
Elimination of Bias in the Legal Profession: _____
Prevention, Detection and Treatment of Substance Abuse: _____

NAME OF ATTENDEE	CALIFORNIA STATE BAR NO.	ATTENDEE SIGNATURE

REMINDER TO PROVIDER: Keep this record of attendance for 4 years after the date of completion of this activity.