

CERTIFICATE OF ATTENDANCE FOR CALIFORNIA MCLE

Top portion of form to be completed by the Provider
--

It is preferred that the form is pre-printed with the attendees name
and bar number.

Provider Name: Armenian Bar Association
Provider Number: 1479
Title of Activity: COVID-19 Workplace Rules for Small Businesses and Employees
Date(s) of Activity: October 21, 2021
Time of Activity: 12:00 PM to 1:00 PM
Location of Activity (City/State): Via Zoom Video Conference

This Activity qualifies for: Participatory Self-Study
Total California MCLE Credit Hours for the above activity: 1 Hour, including
the following sub-field credits:

- Legal Ethics: N/A
- Recognition and Elimination of Bias: N/A
- Competence Issues: N/A

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