

# CERTIFICATE OF ATTENDANCE

1. Program: PROSECUTOR'S GUIDE TO THE AR PRESCRIPTION DRUG MONITORING PROGRAM
2. Program I.D. No.: CRM61066
3. Date and Location: March 15 – 26, 2018, Tele/Sat; April 18 – 26, 2018, Tele/ Sat; May 16 – 24, 2018, Tele/Sat; and June 20 – 28, 2018, Tele/Sat.

This program has been approved by the Arkansas Continuing Legal Education Board for a total of 7 General CLE hours, and      Ethics hour.

### TO BE COMPLETED BY ATTORNEY

**You** are required to complete this portion of the Certificate of Attendance form and return this form to the sponsor **before** you leave. If you leave early, this form **must** be turned in before you leave to receive credit.

The following is a list of individual CLE program segments for this program. Across from each is a figure representing the amount of time for which each segment qualifies. Please circle the program hours, or portions thereof, which you attend, and at the bottom of the appropriate column enter the total CLE hours which you are claiming for this program.

		(Circle credits below) 60 minute hours <u>General CLE</u>	<u>Ethics</u>
<b><u>March 15 – 26, 2018</u></b>			
Tele/Sat	<i>A Prosecutor's Guide to the AR Prescription Drug Monitoring Program</i>	7	
<b><u>April 18 – 26, 2018</u></b>			
Tele/Sat	<i>A Prosecutor's Guide to the AR Prescription Drug Monitoring Program</i>	7	
<b><u>May 16 - 24, 2018</u></b>			
Tele/Sat	<i>A Prosecutor's Guide to the AR Prescription Drug Monitoring Program</i>	7	
<b><u>June 20 - 28, 2018</u></b>			
Tele/Sat	<i>A Prosecutor's Guide to the AR Prescription Drug Monitoring Program</i>	7	
<b>TOTAL</b>		_____	_____ <u>0</u> _____

I certify that I am entitled to \_\_\_\_\_ general hour (s) of credit and 0 hour (s) of ethics credit for this program.

**CLAIMING HOURS FOR SEGMENTS NOT ACTUALLY ATTENDED IS A VIOLATION OF RULE 8.4 (C) OF THE MODEL RULES OF PROFESSIONAL CONDUCT FOR LAWYERS.**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Arkansas Supreme Court Registration No.: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsors: Arkansas Prosecuting Attorneys Association \_\_\_\_\_ Date: \_\_\_\_\_

**If you wish for credit for other states, please complete a separate form for each state and forward a copy to the appropriate state CLE authority.**