Attorney Affirmation

Hogan Lovells

Program Format (select *one*)

○ Teleconference   ○ CD-ROM
○ Webconference   ○ DVD
○ Videoconference   ○ Audio File
○ Audiotape   ○ Online
○ Videotape   ○ Live Broadcast
○ CD   ○ Other _____
                                          (Please Describe)

VERIFICATION CODE:
During the program you will see and/or hear a verification code. This code(s) is required to received CLE credit for this program. Depending on the length of the program there may be multiple codes. Please enter the correct code(s) below:

Code #1: _____   Code #2: _____

Code #3: _____   Code #4: _____

I, _____ , certify that I have participated in the course below <u>in its entirety</u>. Therefore, I request
        (signature)

that I be awarded the applicable number of CLE credits granted by _____ for this course.
                                                              (CLE jurisdiction)

Program Title: _____

Program Location: _____

Location of Attendance: _____
(*if different than program location*)

Date: _____   **Time:** _____

Name: _____   **Email:** _____
                    (*print*)

Date of Bar Admission: _____
(*New York attorneys only*)

— Note to New York attorneys: experienced attorneys (attorneys who have been admitted to the New York Bar for greater than 2 years) may earn CLE credit through non-traditional formats. Newly admitted attorneys may earn CLE credit through non-traditional formats, with the exception of the "Skills" category.

Please return this form to <u>ClientCLE@hoganlovells.com within 30 days of the program date</u>.

Questions? Please contact Ken Townsend at +1 502 915 0250 or kenneth.townsend@hoganlovells.com
or ClientCLE@hoganlovells.com.

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