



ATTORNEY AFFIRMATION
NEW YORK CLE CREDIT FOR NON-TRADITIONAL FORMAT COURSES

I, _____, acknowledge receipt of the course materials for:
(name – please print)

Developing and Presenting Persuasive Evidence of Mental Limitations

(Course Title)

I certify that I have listened to and/or viewed the above course in its entirety. Therefore, I request that I be awarded the applicable number of New York CLE credits for this course.

Format (check one)

- Prerecorded video / archived online
- Live simultaneous teleconference
- Live simultaneous webconference / webinar
- Live simultaneous satellite broadcast
- Fully interactive video conference

COURSE CODE: _____

During the course or program you will see/hear a CLE code. Please enter the code in the above field. If you do not include the code, you will not be awarded New York CLE credit. Please enter any additional codes for this course that you may see/hear below:

Verification Code#1 _____

Verification Code#2 _____

Verification Code#3 _____

Verification Code#4 _____

Signature of Attorney

Date of Completion of CLE Course

PLEASE PRINT CLEARLY your mailing address (organization/firm, address, city, state, zip)

Note: You may EITHER mail this signed original to our office address listed below OR scan and email your signed affirmation to mpeterson@empirejustice.org

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