CAFL WEBINAR ATTORNEY AFFIRMATION

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Please email this form to CAFL TPSU Data Coordinator, Emma Knight at eknight@publiccounsel.net.

Attorney Name:		
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Name of Program:		
Sponsoring Organization:		
Date:		
Time:		
Did Attorney watch webinar live: Yes	No	
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Number of Hours Attorney watched:	_	
Length of Webinar - Total Hours:		

I,_____, hereby affirm under the pains and penalties of perjury that the information contained herein is true.

Attorney Signature