

Official Record of Attendance for Continuing Legal Education Credits (CLE)

Submission of this form and payment are required for Strafford to process your credit

Provider: Strafford, 590 Dutch Valley Rd. NE, P. O. Box 13729, Atlanta, GA 30324-0729

Date: March 9, 2010

Conference Title: Infringement Claims and Opinions of Counsel

Duration: 1:00 PM to 2:30 PM, Eastern Time

MAIN REGISTRANT:

Name: _____

Firm Name: _____

Firm Address: _____

RETURN FORM WITHIN 7 DAYS:

FAX: 404-935-0749

EMAIL: CLE@straffordpub.com

MAIL: Strafford, P.O Box 13729 Atlanta, GA 30324

CLE PROCESSING PAYMENT OPTIONS (X ONE): (note: program registration does not include payment for optional CLE processing)

CLE credit processing is provided at \$65.00 per person per state requested. We will bill main registrant for this program for all attendees requesting CLE credit processing.

CLE credit processing for this program @ \$65 per person, per state = \$ _____ (Amount Due)

Payment already made upon registration

Check (make payable to Strafford)

Credit Card Select Type: MC Visa Am Exp Disc

Account No: _____ Exp. Date: _____

Billing Address: _____

Signature: _____

- CLE is not available for Delaware, Indiana, Kansas, Ohio, Puerto Rico, and for NY attorneys admitted within the last 2 years.
- We will inform participants of the number of credits awarded, upon approval of the program by your state(s)
- Approval times for credits vary by state.

PLEASE PRINT

| NAME | CLE STATE REQUESTED | STATE BAR ID | EMAIL ADDRESS | PHONE # | SIGNATURE |
|------|---------------------|--------------|---------------|---------|---|
| 1. | State 1 | | | | Your signature above is your attestation that you listened to the entire seminar. |
| | State 2 | | | | |
| 2. | State 1 | | | | Your signature above is your attestation that you listened to the entire seminar. |
| | State 2 | | | | |
| 3. | State 1 | | | | Your signature above is your attestation that you listened to the entire seminar. |
| | State 2 | | | | |
| 4. | State 1 | | | | Your signature above is your attestation that you listened to the entire seminar. |
| | State 2 | | | | |
| 5. | State 1 | | | | Your signature above is your attestation that you listened to the entire seminar. |
| | State 2 | | | | |

Please make copies of this page to list any additional attendees

7CE

listening time*