

## Continuing Legal Education Compliance Itemization Report Form

CLE credits may not be claimed for any activity that has not been accredited by the Oregon State Bar Minimum Continuing Legal Education Administrator

|  |                         |               |                            |                               |       |        |           |
|--|-------------------------|---------------|----------------------------|-------------------------------|-------|--------|-----------|
| Applicant's Name   |                         |               |                            |                               |       |        |           |
| Original Program<br>Date (M/D/Y)   | Name of Program Sponsor | Program Title | Location<br>(City & State) | Date<br>Individually Screened | Other | Ethics | Procedure |
| <b>Mandatory Subjects:</b> Legal Ethics (two credit hours) <b>Civil Procedure:</b> (four credit hours) |                         |               |                            |                               |       |        |           |
|  |                         |               |                            |                               |       |        |           |
|  |                         |               |                            |                               |       |        |           |
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|  |                         |               |                            |                               |       |        |           |
|  |                         |               |                            |                               |       |        |           |
|  |                         |               |                            |                               |       |        |           |
| <b>Other Subjects</b> (nine credit hours total)  |                         |               |                            |                               |       |        |           |
|  |                         |               |                            |                               |       |        |           |
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|  |                         |               |                            |                               |       |        |           |
|  |                         |               |                            |                               |       |        |           |

I, \_\_\_\_\_, being duly sworn state that the foregoing report is true and complete.

\_\_\_\_\_ (Applicant Signature)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_\_

\_\_\_\_\_ (Notary Signature)

Notary Public for: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_