



CERTIFICATE OF ATTENDANCE FOR CALIFORNIA MCLE

Provider Name: **California Minority Counsel Program**
 Provider Number: **9949**
 Title of Activity: **Strengthening Public & Private Sector Partnerships**
 Date(s) of Activity: **Wednesday, March 26, 2014**
 Time of Activity: **1:15 pm – 4:00 pm**
 Location of Activity (City/State): **Oakland City Hall, One Frank Ogawa Plaza, Oakland, CA**

- ◆ California MCLE Credit Hours 1.25 **Effective Representation of Public Entities in Public Contracting (1:15 pm – 2:30 pm)**
- ◆ California MCLE Credit Hours 1.25 **Land Use & Environmental Law - Shaping Our Community (2:45 pm – 4:00 pm)**

Total California MCLE Credit Hours for the above activity are 2.5 , including the following sub-field credits:

- ◆ Legal Ethics 0
- ◆ Elimination of Bias in the Legal Profession 0
- ◆ Prevention, Detection and Treatment of Substance Abuse/
Mental Illness that Impairs Professional Competence: 0

Bottom portion of form to be completed by the Attorney after participation in the above-referenced activity

By signing below, I certify that I participated in all, or some*, of the activity described above and am therefore entitled to the following MCLE credit hours –

- ◆ California MCLE Credit Hours _____ **Effective Representation of Public Entities in Public Contracting**
- ◆ California MCLE Credit Hours _____ **Land Use & Environmental Law - Shaping Our Community**

Total California MCLE Credit Hours _____ , including the following sub-field credits:

- ◆ Legal Ethics _____
- ◆ Elimination of Bias in the Legal Profession _____
- ◆ Prevention, Detection and Treatment of Substance Abuse/
Mental Illness that Impairs Professional Competence: _____

(You may not claim credit for sub-fields unless the Provider is granting credit in those areas and you participated in those portions of the activity)

Print Your Name _____

Your California State Bar Number _____

Signature _____

* partial participation hours must be pro-rated