

**UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF WEST VIRGINIA**

REPORT OF CONTINUING LEGAL EDUCATION (CLE) CREDIT

Name: _____ Date: _____

The following CLE activity was undertaken:

Broadcast/Video

Seminar/Workshop/Training

Other

Title of CLE program: _____

Sponsor/Presenter(s): _____

Date(s) attended/Completed: _____

Location: _____

Number of CLE credits approved for the program: _____

Number of CLE credits claimed: _____

Please provide a brief description/synopsis of the federal criminal law or procedure CLE training you received.

A certificate of attendance/completion has been filed with the appropriate MCLE Board(s) or Commission(s) for this activity. Yes No