



## CALIFORNIA MCLE SELF-STUDY CERTIFICATE

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Provider Orrick, Herrington & Sutcliffe

Attorney Name \_\_\_\_\_

California Bar Number \_\_\_\_\_

Title of Program COVID-19 Briefing & Conversation - Financial Statement Disclosure Considerations, Challenges in Executing Audits of Internal Controls, Leveraging Roll-Forwards and Roll-Backs for Virtual Closings, Class Action Civil Litigation, Critical Audit Matters and Additional Disclosures in PCAOB

Date of Activity \_\_\_\_\_

FORMAT: ONLINE

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Total Hours 1.0

Specific Application of Hours:

Legal Ethics \_\_\_\_\_

Competence (substance abuse) \_\_\_\_\_

Elimination of Bias \_\_\_\_\_

General 1.0

**KEEP FOR YOUR RECORDS**

\*Completion of the evaluation is optional.



**California MCLE Activity Evaluation Form - please return to [mwoods@orrick.com](mailto:mwoods@orrick.com) and [jgracey@orrick.com](mailto:jgracey@orrick.com)**

<b>Course:</b> COVID-19 Briefing & Conversation - Financial Statement Disclosure Considerations, Challenges in Executing Audits of Internal Controls, Leveraging Roll-Forwards and Roll-Backs for Virtual Closings, Class Action Civil Litigation, Critical Audit Matters and Additional Disclosures in PCAOB Reminders	<b>Date:</b> 04/17/2020
<b>Format:</b> Webconference	<b>Time:</b> 8:00-9:00AM PDT
<b>Instructor (s):</b> Hughes, William Meadows, Michele Rowe, Tiffany A. Stern, Robert	<b>Location:</b>
<b>CA CLE</b> 1 General	
<b>Credits:</b>	
<b>NY CLE</b> 1 PP	
<b>Credits:</b>	

**1. Did this program meet your educational objectives?\*** (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5  4  3  2  1

**2. Did the environment have a positive influence on your learning experience?\*** (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5  4  3  2  1

**3. Were you provided with substantive written materials?\*** (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5  4  3  2  1

**4. Did the course update or keep you informed of your legal responsibilities?\*** (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5  4  3  2  1

**5. Did the activity contain significant current professional content?\*** (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5  4  3  2  1



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**Date:** 04/17/2020

**Time:** 8:00-9:00AM PDT

**Location:**

**6. Please rate the faculty \*** (Rating, Instructor )  
Overall teaching effectiveness

**Instructor:** Hughes, William

5  4  3  2  1

**Instructor:** Meadows, Michele

5  4  3  2  1

**Instructor:** Rowe, Tiffany A.

5  4  3  2  1

**Instructor:** Stern, Robert

5  4  3  2  1

**7. Please rate the faculty \*** (Rating, Instructor )  
Effectiveness of teaching methods

**Instructor:** Hughes, William

5  4  3  2  1

**Instructor:** Meadows, Michele

5  4  3  2  1

**Instructor:** Rowe, Tiffany A.

5  4  3  2  1

**Instructor:** Stern, Robert

5  4  3  2  1



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**Location:**

**8. Please rate the faculty** \* ( Rating, Instructor )  
Significant current knowledge of subject

**Instructor:** Hughes, William

5  4  3  2  1

**Instructor:** Meadows, Michele

5  4  3  2  1

**Instructor:** Rowe, Tiffany A.

5  4  3  2  1

**Instructor:** Stern, Robert

5  4  3  2  1

**9. Name of Participant (optional):** ( Fill in the blank )

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Additional Comments:

\* Required Question