



ATTORNEY AFFIRMATION
NEW YORK CLE CREDIT FOR NONTRADITIONAL FORMAT COURSE

I, _____, acknowledge receipt of the course materials for:
(attorney name)

Course Title: COVID-19 Briefing & Conversation – Workforce Reduction Planning, Tax Relief Programs, SBA Loan Update, Healthcare Supply Donations: Mitigating Product Liability, IP and Other Risks

Speaker(s): Laura Becking, Michael Delikat, Elyse Echtman, Blake Ilstrup, John Narducci

I certify that I have listened to and/or viewed the above course in its entirety. Therefore, I request that I be awarded the applicable number of New York CLE credits for this course, as follows:

Total Credits: 1.0
Specific Application of Credits:
Ethics and Professionalism: _____ **Practice Management:** _____
Skills: _____ **Areas of Professional Practice: 1.0**

Format (*check one*)

- | | |
|--|---|
| <input type="checkbox"/> Teleconference | <input type="checkbox"/> CD-ROM |
| <input type="checkbox"/> Webconference | <input type="checkbox"/> DVD |
| <input type="checkbox"/> Videoconference | <input type="checkbox"/> Audio File |
| <input type="checkbox"/> Audiotape | <input checked="" type="checkbox"/> Online |
| <input type="checkbox"/> Videotape | <input type="checkbox"/> Live Broadcast |
| <input type="checkbox"/> CD | <input type="checkbox"/> Other _____
(Please Describe) |

COURSE CODE: _____

During the course or program you will see and/or hear a CLE code. Please enter the code in the above field. If you do not include the code, you will not be awarded New York CLE credit. If there are multiple codes (for example, a separate code for each segment of a program) please enter here:

Code #2: _____ Code #3: _____
Code #4: _____ Code #5: _____

Orrick, Herrington & Sutcliffe LLP
Name of CLE Provider

Signature of Attorney

Date of completion of CLE course
(*New York attorneys earn CLE credit as of the date they complete a CLE course*)

- To obtain New York CLE credit, please complete and sign this form and then submit it to the CLE Provider (please email the completed form to mwoods@orrick.com and jgracey@orrick.com). Once your participation is verified by the provider, a New York CLE Certificate of Attendance will be issued to you by the provider.
- New York attorneys should retain a copy of this affirmation along with their New York CLE Certificate of Attendance.
- Experienced New York attorneys (attorneys who have been admitted to the New York Bar for more than two years) may earn CLE credit through nontraditional formats. Generally, newly admitted attorneys may not earn CLE credit through nontraditional formats.
- Please note that in New York, one hour of CLE credit consists of at least 50 minutes of instruction. Credit hours must be calculated in no less than 25-minute (.5-hour) increments.

*Completion of the evaluation form is optional.



New York MCLE Activity Evaluation - please return to mwoods@orrick.com and jgracey@orrick.com

Course: COVID-19 Briefing & Conversation - Workforce Reduction Planning, Tax Relief Programs, SBA Loan Update, Healthcare Supply Donations: Mitigating Product Liability, IP and Other Risks

Date: 04/02/2020

Time: 8:00-9:00AM PDT

Location:

Format: Webconference

Instructor: Becking, Laura L.

(s): Delikat, Michael
Echtman, Elyse D.
Ilstrup, Blake A.
Narducci, John

CA CLE: 1 General

Credits:

NY CLE: 1 PP

Credits:

1. Program Content (Multiple Choice)

Please rate:

Excellent Good Fair Poor N/A

2. Instructor Quality (Multiple Choice, Instructor)

Please rate:

Instructor: Becking, Laura L.

Excellent Good Fair Poor N/A

Instructor: Delikat, Michael

Excellent Good Fair Poor N/A

Instructor: Echtman, Elyse D.

Excellent Good Fair Poor N/A

Instructor: Ilstrup, Blake A.

Excellent Good Fair Poor N/A

Instructor: Narducci, John

Excellent Good Fair Poor N/A

3. Written Materials (Multiple Choice)

Please rate:

Excellent Good Fair Poor N/A

4. Facility (Multiple Choice)

Please rate:

Excellent Good Fair Poor N/A



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5. Effectiveness of Technology (Multiple Choice)

Please rate:

Excellent Good Fair Poor N/A

6. Relevance (Multiple Choice)

Please rate:

Excellent Good Fair Poor N/A

7. What was the most valuable part of this seminar? (Essay)

Comments:

8. What changes would you recommend to make the seminar more helpful to you? (Essay)

Comments:

9. General Comments (Essay)

Comments:

10. Name (optional) (Fill in the blank)
