



AGENCY CEU FORM

NOTE: It is suggested that CERTIFICATES be emailed to mary.mccann@ccla.org at the conclusion of the event. **It is your responsibility to make sure that the CLLA office receives your certificate no later than Friday, March 7, 2025.**

Name: _____

Firm/Agency: _____

Business Address: _____

City _____ State _____ Zip _____

Phone: _____ Email: _____

Indicate with a check (✓) the sessions you attended for CEU credit(s).

Saturday, February 15, 2025

- ☐ THE SWAMP IS NOT SO SCARY – DEMYSTIFYING LOUISIANA LAW (1)
- ☐ ESTATE PLANNING WHEN A PRIVATELY HELD BUSINESS IS A PRIMARY ASSET (1)
- ☐ SHOW ME THE MONEY – WHAT AGENCIES LOOK FOR IN A LAW FIRM (1)

By signing below, I certify that I attended the programs described above and am entitled to claim _____ total credit hours.

Signature: _____

For office use only

Accepted: _____ Date: _____