CERTIFIED PROFESSIONAL GUARDIANSHIP AND CONSERVATORSHIP BOARD CONTINUING EDUCATION UNITS PROGRAM APPROVAL FORM

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Tit	le of Act	tivity:	On Demand - 69th Annual Estate P	anning Semin	ng Seminar				
Co	ontact: Lisa Haynie, 425.260.0433, lisah@meet				<u>.net</u>				
Lo	cation:								
Date(s):			Ве	gin Time:		End Time:			
ls th	☐ I	NO	nd/pre-recorded activity? e attach your certificate of complet	ion.					
Did ;			re activity? fill in the Start Time and End Time	fields for the	segments yo	ou attended	below.		
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In accordance with Continuing Education <u>Regulation 207</u>, AOC Staff has **APPROVED** this request for Continuing Education Units (CEUs).

Office of Guardianship and Elder Services

(360) 705-5302

Stace	ey.Johnson@courts.wa.gov							
NOTE: The Certified Professional Guardianship and Conservatorship Board requires each attendee to receive a copy of this form. The sponsor shall verify attendance by providing a completed attendance form and program materials to the Administrative Office of the Courts, PO Box 41170, Olympia WA 98504-1170 or quardianshipprogram@courts.wa.gov within 30 days of the completion of the program.								
Please return th	nis form to the sponsor PRIOR to leaving today's program							
	Attestation of Program Completion							
	st that I have attended, partially attended, taught or participated in the class session(s) as nat if I do not return this form that I may not receive credit for this Continuing Education							

Signature

CPGC#

Date

Stacey Johnson

Print Name