ATTORNEY AFFIRMATION
CLE CREDIT FOR NONTRADITIONAL FORMAT COURSE

I, _____, acknowledge receipt of the course materials for:
(Attorney Name)

Lessons Learned from Licensing Disputes – A Litigator's Perspective
(Course Title)

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 CLE credits for this course.

Format *(check one)*		**Course Codes:**
G Teleconference	**G** CD-ROM	**Code #1:**_____ **Code #2:**_____
G Webconference	**G** DVD	During the course of 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 CLE credit. If there are multiple codes (for example, a separate code for each segment of a program) please enter below
G Videoconference	**G** Audio File	
G Audiotape	**G** Online	
G Videotape	**G** Live Broadcast	
G CD	**G** Other _____ (Please Describe)	**Code #3:**_____

Ballard Spahr LLP
Name of CLE Provider

_____
Signature of Attorney

_____
Email Address (print clearly)

Thursday, March 30, 2023 9:00 – 10:00 a.m. ET
Date of Completion of CLE Course

List State(s) where you require CLE credits:

_____
State **Attorney License No.**

_____
State **Attorney License No.**

_____
State **Attorney License No.**

To obtain CLE credit, please complete and sign this form and then submit it to the CLE provider. Once your participation is verified by the provider, a CLE Certificate of Attendance will be issued to you by the provider. Attorneys should retain a copy of this affirmation along with their CLE Certificate of Attendance.

TO BE COMPLETED BY ATTORNEY

Evaluation

	Excellent	**Exceeded Expectations**	**Met Expectations**	**Needs Improvement**	**Failed to Meet Expectations**
Overall Quality					
Written Materials					
Moderator:					
Ryan Udell, *Partner, Business & Transactions, Ballard Spahr LLP* **and** *Team Co-Leader, Life Sciences*					
Speaker:					
Robert Baron, *Partner, IP, Ballard Spahr LLP*					
Ease of Use of Technology					

***Please note:** **Please email this completed form to Donna Calvin, CLE Coordinator, Ballard Spahr, at calvin@ballardspahr.com. You will receive an attendance certificate within thirty (30) days of the conclusion of the program.**