



# Certificate of Completion

for  
presented  
to  
for the  
completion  
of

bar  
number

On-Demand CLE  
on

## Jurisdiction Accreditation Details

Accreditation Status  
Activity/Program Code  
ABA Program ID  
ID: Training Type

**TO BE COMPLETED BY ATTENDEE:**  
By signing below, I certify that I completed the  
program described above and am entitled to  
claim the credits detailed.

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**\*\*\* CREDITS \*\*\***

TOTAL CREDITS based on attended sessions

**ATTENDEE'S TOTAL CREDITS ABOVE INCLUDE**

**Credit Hour**

**Specialty Credit Type**

Mental Illness Awareness

Available credits may be subject to your jurisdiction's rounding requirements.

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ABACLE MCLE Department  
321 N. Clark Street  
Chicago, IL 60654

Gina Roers-Liemandt, ABACLE Director

**\*\*\* IMPORTANT INFORMATION FOR YOUR JURISDICTION \*\*\***

**\*\*\* Customer Service Information \*\*\***

# Sessions Attended

Attended	Title	Date	Start Time	Session Duration (minutes)	Attended Duration (minutes)	Jurisdiction Credit Type	ABA Session ID
Yes	Catapulting Your Practice and Avoiding Stress, Depression and Addiction in a COVID Culture [CC]	Jul 15, 2020	01:00 PM	60	60	Mental Illness Awareness	CE2007CCC