Email: affidavit@scic.com

Webinar Affidavit South Carolina

| | certify that I participated in and attended all |
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| (Name) | |
| sessions of the following web cast course | 6000071510, 146216, 6000077052, 6000103413 |
| | (South Carolina ID#) |
| ending on this date | |
| | |
| | Signature of Producer |
| | |
| | Print Name |
| | |
| | Signature of Disinterested Third Party |
| | |
| | Print Name |