

# CERTIFICATE OF ATTENDANCE

## AB 1234 TRAINING

**Provider:** Meyers Nave  
**Subject Matter/Title:** AB 1234 Ethics Training  
**Date and Time:** Wednesday, September 13, 2023  
**Location:** 400 Squaw Creek Road, Olympic Valley, CA, 96146  
**Length of Activity:** 2.0 hours

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*To Be Completed After Participation In The Above-Named Activity*

By signing below, I certify that I participated in the activity described above:

Print Name: Linda Greer

*Linda C. Greer RN*

Signature: \_\_\_\_\_

**REMINDER:** A local agency shall maintain these records for at least five (5) years after local officials receive the training. These records are public records subject to disclosure under the California Public Records Act (Chapter 3.5 [commencing with Section 6250] of Division 7 of Title 1).