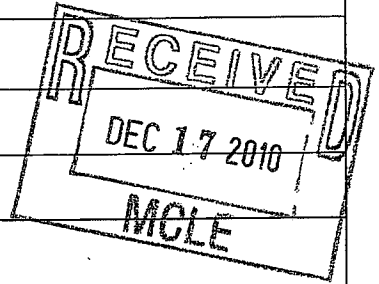


MCLE FORM 2: Group CLE Activity Accreditation Application

Instructions:

Pursuant to MCLE Rule 4.3, sponsors of Group CLE Activities must apply for accreditation no later than 30 days after the completion of the CLE activity. Individual bar members may also apply on their own behalf for accreditation of a Group CLE Activity by using this form. No fee is required. The sponsor fee is \$40 for a program of 4 or fewer hours and \$75 for a program of more than 4 hours. The sponsor fee for a series of programs not exceeding 3 hours in 3 consecutive months is \$40. A sponsor fee is required for each repeat (live or electronic) of the programs. (See MCLE Rule 4.3(c).)

Name and address of person or organization applying (Please print. This will be mailing label): Portland Tax Forum c/o Ronald Shellan, Chair Miller Nash LLP, 3400 U.S. Bancorp Tower 111 S.W. Fifth Avenue, Portland Oregon 97204-3699		Applying As (check one): <input checked="" type="checkbox"/> Sponsor <input type="checkbox"/> Individual Member Bar # _____
Phone: 503-224-5858	Contact Person (Sponsors only): Ronald Shellan	
Title of CLE Activity: Portland Tax Forum: Deferred Compensation		
Name of CLE Sponsor (if not the applicant):		Phone:
Date(s) and Location(s) of CLE Activity Date(s) 11/18/2010	Location(s) (city/state) Portland, OR	Number of credits requested: General <u>1.5</u> Practical Skills _____ Prof. Resp.: Ethics _____ Child Abuse Rep _____ A/J _____ TOTAL <u>1.5</u>
Delivery method(s): <input checked="" type="checkbox"/> faculty in room with participants; <input type="checkbox"/> telephone to broadcast site; <input type="checkbox"/> interactive video; <input type="checkbox"/> satellite <input type="checkbox"/> audiotape presentation; <input type="checkbox"/> videotape presentation; <input type="checkbox"/> interactive computer/internet; <input type="checkbox"/> discussion leader present		
Is this a replay? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please identify program producer:		
Will this program include the use of written materials? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain) Total pages: 17		List any attendance restrictions [See MCLE Rule 5.1(f)]
Describe sponsor's experience in providing CLE activities (for non-OSB accredited sponsors): See attached.		
This application will not be processed unless the following are enclosed: ✓ Copy of the program agenda showing timelines ✓ Biographical information on the program faculty ✓ Copy or sample (15-20 pages) of program's written materials - include ethics portion if applicable ✓ Sponsor Fee		
Sponsor/Member Signature: <i>Kimberly Gray</i>		Date: 12/16/10



OSB MCLE Office Use Only			
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied MCLE Dept.: <i>Barwise CLE</i> Date: <i>1/6/2011</i>	Fee Paid: <i>PD \$800441864</i> Reciprocity? <input type="checkbox"/> Yes <input type="checkbox"/> No Program No.: <i>176 * 110</i>	MCLE Credits: General: <i>1.5</i> Ethics: A/J: General or Practical Skills: Total: <i>1.5</i>	

Make a copy of this form for your records and mail the original to:
 Oregon State Bar MCLE, 16037 SW Upper Boones Ferry Rd., PO Box 231935, Tigard, OR 97281-1935
 (503) 620-0222 X368 or 1-800-452-8260 X368