ACEP24 Scientific Assembly
September 29 – October 2, 2024
CME ATTESTATION FORM - AOA Category 1A Credit

Please complete this form indicating each session that you attended. Must be emailed to (sconnolly@acep.org) at the end of the conference to be considered for credit.

Instructions: **1)** Fill in total hours for each course attended; **2)** Print name, AOA number and sign form; **3)** Turn in form

Course attended:	Hours Possible:	Total Hours Attended:

Total Hours Attended _____

Name AOA # (REQUIRED)

I certify that the above-listed hours are correct.

Signature Date