

CERTIFICATE OF ATTENDANCE

MISSOURI

CONTINUING LEGAL EDUCATION (CLE)

Name of Provider: Estate Planning Council of St Louis

Date of Program: 01-26-2026

Title of presentation: 2026 New Developments and Planning Ideas

Location of Program: Saint Louis Club 7676 Forsyth Blvd., Clayton MO 63105

Instructor(s): Elliot Dole, Steve Gorin, John Scott, Michael Tessler

CLE: 2.0 hour.

Delivery Method: In Person

Attendee Name: _____

Attendee Address: _____

Last 4 Social Security #: _____ *License #:* _____

I certify that the above identified individual attended the continuing education program noted, for the actual number of credit hours indicated.

Joan Hecker

Printed Name of Approved Provider Official

Signature of Approved Provider Official

Accreditation Coordinator

Title Executive Director

Date

1/26/2026

Estate Planning Council of St Louis
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