

CERTIFICATE OF ATTENDANCE

MISSOURI

CLASS ATTENDANCE

Name of Provider: Estate Planning Council of St Louis

Title of Program: The ABC's of CRT's: Understanding Charitable Remainder Trusts for Estate Planning

Location: 7676 Forsyth Blvd

Date of Program: 04-28-2025

Instructor(s): Paul Caspersen, President, Planned Giving Interactive

Time: 1.0 hour.

Delivery Method: In Person (hybrid)

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 4/28/25

Estate Planning Council of St Louis

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