



**BEXAR COUNTY CLE COMPLIANCE AFFIDAVIT
FOR 2ND AND 3RD/ SJF DEGREE
AND ALL LEVELS OF APPEALS**

Date: _____

Name: _____

Business Address: _____

E-mail address: _____

Bar No. _____

Business Phone: _____

Cell Phone: _____

Fax No. _____

I have attended the following criminal-related CLE hours **since December 2019:**

Course Title	Date	CLE hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

From the following criminal-related CLE in the **previous year**, I have carryover of _____ hours.

Course Title	Date	Carryover CLE hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SELF STUDY HOURS: Self Study Criminal-related Hours _____
(3 hours maximum allowed)

TOTAL HOURS: **Total Criminal-related CLE Hours*** _____

*10 hours total of criminal-related CLE required for the 2nd and 3rd/SJF degree and appeals lists.

You must provide a printout from the State Bar of Texas confirming the above information.

By my signature I attest that the information I have provided in this application is true and accurate.

I, _____, Attorney at Law, certify under penalty of law that the above information and facts are true and correct.

EXECUTED on the _____ day of _____, 20__.

Signature of Affiant

**PLEASE RETURN COMPLETED FORM BY EMAIL TO:
lance.aldridge@bexar.org**

**CRIMINAL DISTRICT COURTS ADMINISTRATION 101 W. NUEVA,
SUITE 301
SAN ANTONIO, TEXAS 78205**