

**NON-CAPITAL CASE  
C.J.A. PANEL CERTIFICATION FORM**

**JUNE 30, \_\_\_\_\_ to JUNE 30, \_\_\_\_\_**

I hereby certify that, for the twelve-month period of time shown above, I have met the requirements for continued membership on the C.J.A. Non-Capital Case panel for the Eastern District of Arkansas: namely, I have completed at least six (6) hours of specialized criminal C.L.E.

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Name (Printed or Typed)

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Signature