



## Letter of Attendance

The West Virginia Oral Health Coalition verifies that \_\_\_\_\_ participated in:

**Course Title:** What You Don't Know About Bleeding Disorders.....But Need To

**Course Date:** \_\_\_\_\_ (pre-recorded webinar)

**Location:** Online at [For Providers : Dental Program : Support & Resources : National Bleeding Disorders Foundation](#)

This participant attended 1.0 hours of this lecture-based program.

**PARTICIPANTS:** Continuing education credits issued for participation in the CE activity may not apply toward license renewal in all states. It is the responsibility of each participant to verify the requirements of his/her state licensing board(s).

Participants should retain this attendance letter for their records.