

Verification of Attendance Form
for Continuing Professional Education Activities

Name: Ka Man Simon Leung	Certification Number: 232287608
Title of Program/Course Attended: MOCTF 2024 - CTF Award and Sharing Session	
Date(s): 06/07/2024	CPE Hours Earned: 3
Name of Sponsoring Organization: MOCTF	
Description: Open Group Sharing and Award	
Location: Macau CEAP	
Name of Verifier or Presenter: Macan CTF	
Signature of Verifier or Presenter: Macan CTF boards info @ macscf.com	

Instructions: Please complete all fields. Field descriptions are listed below.

Name: Name of individual claiming CPE Hours.

Certification Number: Certification Number of the applicable certification.

Title of Program/Course Attended: The title/name of the program, course or event for which CPE has been claimed.

Date(s): The dates for which the claimed program, course or event took place.

CPE Hours Earned: The number of CPE hours earned during the program, course or event.

Name of Sponsoring Organization: The name of the organization, company, school or group that held the program, course or event.

Description: A brief description of the program, course or event.

Location: Location that the program, course or event was completed.

Name of Verifier or Presenter: Name of the individual who is confirming completion of the program, course or event.

Signature of Verifier or Presenter: Signature of the individual who is confirming completion of the program, course or event.

Verification of Attendance Form
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Name: Ka Man Simon Leung	Certification Number: 232287608
Title of Program/Course Attended: MOCTF 2025 - Sharing Session OSINT and AI	
Date(s): 06/07/2025	CPE Hours Earned: 1
Name of Sponsoring Organization: MOCTF	
Description: Open Group Sharing for AI and OSINT	
Location: Macau CEAP	
Name of Verifier or Presenter: Macan CTF	
Signature of Verifier or Presenter: Macan CTF boards info@moctf.com	

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Verification of Attendance Form
for Continuing Professional Education Activities

Name: Ka Man Simon Leung	Certification Number: 232287608
Title of Program/Course Attended: 2024 ISACA Macao Chapter Annual General Meeting	
Date(s): 11/29/2024	CPE Hours Earned: 3
Name of Sponsoring Organization: ISACA Macao Chapter	
Description: ISACA Macao Chapter annual meeting	
Location: Rio Hotel Macao	
Name of Verifier or Presenter: Terry Cheung	
Signature of Verifier or Presenter:	

Instructions: Please complete all fields. Field descriptions are listed below.

Name: Name of individual claiming CPE Hours.

Certification Number: Certification Number of the applicable certification.

Title of Program/Course Attended: The title/name of the program, course or event for which CPE has been claimed.

Date(s): The dates for which the claimed program, course or event took place.

CPE Hours Earned: The number of CPE hours earned during the program, course or event.

Name of Sponsoring Organization: The name of the organization, company, school or group that held the program, course or event.

Description: A brief description of the program, course or event.

Location: Location that the program, course or event was completed.

Name of Verifier or Presenter: Name of the individual who is confirming completion of the program, course or event.

Signature of Verifier or Presenter: Signature of the individual who is confirming completion of the program, course or event.