# In-service information

## In-service Information:

| | |
|---|---|
| Date | |
| Host | |
| Product(s): | |
| Estimated $ per person: | |
| Meeting Name: | |
| Office / Institution Name & Address: | |

All attendees, DeliveIt employees, and speakers: By checking yes to the "Consumed Meal?" box, you acknowledge that any meals provided during this event are tracked and potentially reported per DeliveIt's responsibilities under federal and state laws.

| First Name | Last Name | Credentials (e.g., MD, NP, RPh) | State(s) Licensed In (list all) | NPI # (optional) | Select all that apply: | Consumed Meal? |
|---|---|---|---|---|---|---|
| | | | | | ☐ Resident ☐ Federal Employee | ☐ Yes ☐ No ☐ No Show |
| | | | | | ☐ Resident ☐ Federal Employee | ☐ Yes ☐ No ☐ No Show |
| | | | | | ☐ Resident ☐ Federal Employee | ☐ Yes ☐ No ☐ No Show |
| | | | | | ☐ Resident ☐ Federal Employee | ☐ Yes ☐ No ☐ No Show |
| | | | | | ☐ Resident ☐ Federal Employee | ☐ Yes ☐ No ☐ No Show |
| | | | | | ☐ Resident ☐ Federal Employee | ☐ Yes ☐ No ☐ No Show |
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| | | | | | ☐ Resident<br>☐ Federal Employee | ☐ Yes<br>☐ No<br>☐ No Show |
| | | | | | ☐ Resident<br>☐ Federal Employee | ☐ Yes<br>☐ No<br>☐ No Show |
| | | | | | ☐ Resident<br>☐ Federal Employee | ☐ Yes<br>☐ No<br>☐ No Show |
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