**Lista de asistencia de la reunión del GRUPO MLA**

**MLA GROUP meeting attendance List**

**LUGAR Y FECHA / PLACE AND DATE:**

**Punta Cana, Dominican Republic, March 12, 2020.**

By signing this form, attendees confirm that the information stated on their signed FM 011 Declaration of Impartiality and Confidentiality is valid at the date of this MLA Group meeting. Attendees also agree to disclose any potential conflict of interest during this MLA Group meeting.

**Al firmar este formulario, los asistentes confirman que la información contenida en su FM 011 Declaración de imparcialidad y confidencialidad es válida a la fecha de esta reunión del Grupo MLA. Los asistentes también acuerdan revelar cualquier conflicto de interés potencial durante esta reunión del Grupo MLA.**

|  | **NOMBRE / NAME** | **ORGANISMO - PAIS / BODY - COUNTRY** | **EMAIL** | **SIGNATURE / FIRMA** |
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