

SEMINAR REGISTRATION FORM
2003 ACCOUNTING AND AUDITING UPDATE SEMINAR
(PLEASE PRINT OR TYPE)

Name: _____

Title: _____

Agency: _____

Mailing Address:

Within Wake County (State Agencies Only):

Mail Service Center Number: _____ City: _____

Outside of Wake County with Courier #:

State Courier Number: _____ - _____ - _____

All Other (If no Mail Service Center # or State Courier #):

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

E-Mail Address: _____

Seminar Information:

Place: McKimmon Center
Raleigh, North Carolina

Date/ March 12 and 13, 2003
Time: Registration: 8:00 a.m. - 8:30 a.m. Seminar: 8:30 a.m. - 5:00 p.m.

Fees: \$100 per attendee
Registration fee covers the cost of materials distributed at the seminar, coffee breaks, and lunch and is not refundable without a \$15 cancellation fee after March 5, 2003. Mr. Powell has approved the excess registration fee in accordance with the State Budget Manual, Section 5, Page 37. **The course is intended to qualify for 16 hours of CPE.**

Dress: Participants are encouraged to dress comfortably in business casual attire.

Please mail completed registration form and check made payable to:

Office of the State Controller
Attn: John Morgan
1410 Mail Service Center
Raleigh, N C 27699-1410

The Office of the State Controller is registered with the North Carolina State Board of CPA Examiners as a sponsor of continuing professional education. Complaints or comments regarding registered sponsors may be addressed to the NC State Board of CPA Examiners, PO Box 12827, Raleigh NC 27605-2827.