



Independent Insurance Agents of San Antonio  
8015 Broadway, #106, San Antonio, TX 78209-2696  
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# CE SEMINAR!

**THURSDAY, SEPTEMBER 16, 2010**

## **“Bond Workshop: Contract & Commercial”**

**12:30 – 4:30 p.m.**

**San Antonio CPA Continuing Education Foundation Training Center**

**Alamo Towers West - 901 NE Loop 410, Suite 420, San Antonio, Texas**

**Presenter: Bob Cave**  
**Chief Underwriting Officer**  
**SureTec**

**Cost:** ~ IIASA Members - Free  
~ Non-members - \$60 per person

**CE Credit:** 4 hours General Lines (all license types)

*TO REGISTER: Complete the form below & FAX to (210) 828-2375 or reply e-mail*  
IIASA Continuing Education Seminar – THURSDAY, SEPTEMBER 16, 2010

Company/Agency Name \_\_\_\_\_

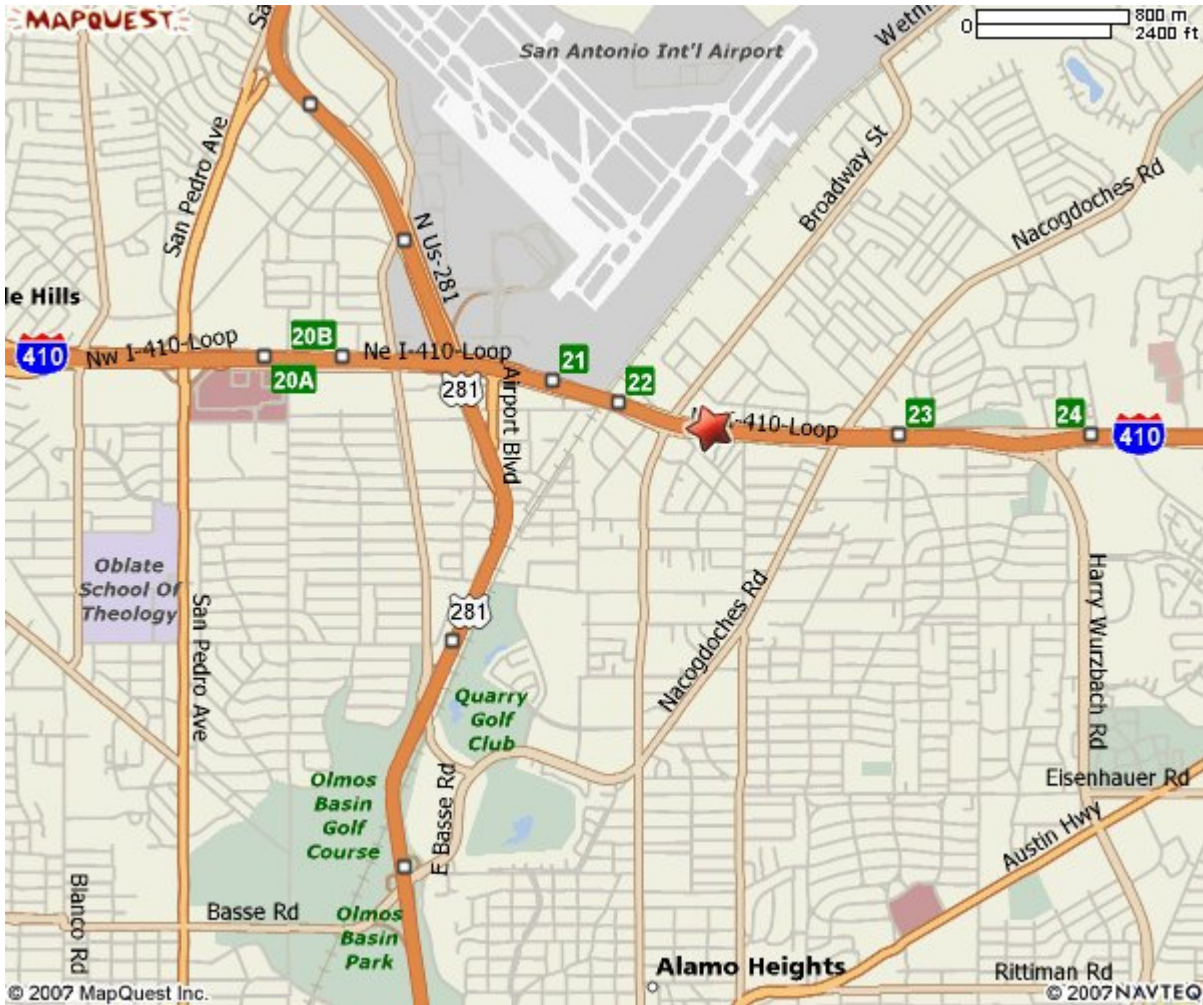
Individual Name \_\_\_\_\_ License # \_\_\_\_\_ E-mail \_\_\_\_\_ Part(s) \_\_\_\_\_

Individual Name \_\_\_\_\_ License # \_\_\_\_\_ E-mail \_\_\_\_\_ Part(s) \_\_\_\_\_

Individual Name \_\_\_\_\_ License # \_\_\_\_\_ E-mail \_\_\_\_\_ Part(s) \_\_\_\_\_

Individual Name \_\_\_\_\_ License # \_\_\_\_\_ E-mail \_\_\_\_\_ Part(s) \_\_\_\_\_

**Please cancel your registration if you are unable to attend this course.**



**San Antonio CPA Society  
901 NE Loop 410  
Suite 420  
San Antonio, TX 78209-1308**

# INDEPENDENT INSURANCE AGENTS OF SAN ANTONIO



## Credit Card Information

Name as it appears on card \_\_\_\_\_

Your name \_\_\_\_\_

Billing Address \_\_\_\_\_

Zipcode \_\_\_\_\_

Card type: \_\_ Visa \_\_ MasterCard \_\_ Discover \_\_ Am Express

**Card Expiration:** \_\_\_\_\_

Card number \_\_\_\_\_ Security code \_\_\_\_\_  
*3 or 4 digits on reverse*

Amount charged \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Telephone \_\_\_\_\_