

Church Accounting & Clergy Tax Seminar® 2017 Registration Form

Saturday January 7, 2017 The Heights

8001 Dale Avenue Richmond Heights, MO 63117

ame of Church	Organization	ı:			
mail Address: _					
ailing Address:	Stree	et			
	City		State	Zip	
lephone	·	Co	ntact Person	•	
-					
Г		SELEC	T YOUR REGISTRATION		
	Quantity	Price	Description	Total	
		\$190	General Registration		
		\$75	Seminar Manual (Manual not included with registration)		
_		\$250	On Site Registration		
		Total Amour	nt \$		
ame of Attend	ees:				
_					
	O	•	il * Online * Email * Fax * ·*********	-	
Method	of Payment (Circle One) Che	eck MasterCard Visa Discover	AMEX	
Card Number:			Expiration Date:/		
	Name on Card:				

Davis Associates, CPAs

4119 N. Hwy. 67 | Florissant, MO 63034 Phone 314.653.0008 | Fax 314.653.0019 www.DavisAssociatesCPA.com

Email: dmdcpa@Davis Associates CPA.com