



*Registration Form*

# DISPOSITION OF QUALIFIED PLANS & IRAS

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5.23.17

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

☐ Please add my email address to your mailing list  
for future seminars and legal updates.

Please fax/email/mail before **Friday, May 12th** to:

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