



California Society of Tax Consultants

1040 RUNNING START JANUARY 2009 UPDATE

San Diego County Chapters

Federal-6 Hours 1000-CE-1124 State-2 Hours

Federal and California Update presented by David Gorsich, E.A. and Michael Karll, E.A.

Price / Lunch Included

- \$ 160.00 Members through December 18, 2008**
- \$ 175.00 Non-Members through December 18, 2008**
- \$ 175.00 Members after December 18, 2008**
- \$ 195.00 Non-Members after December 18, 2008**
- \$ 200.00 All Walk-ins without Paid Registration.**

Refund Policy: A full refund less \$25 will be granted when a written request is received by the sponsoring chapter chairperson on or before 12/21/08. No refund will be granted after 12/21/08.

East County

Tuesday
January 6, 2009
Sycuan Resort
Formerly Singing Hills
3007 Dehesa Road
El Cajon, CA
Dan Carr
Phone: (619) 442-9602
Fax: (619) 442-9603
338 W Lexington Ave #109
El Cajon, CA 92020
Email: dcarr23886@aol.com

San Diego

Thursday
January 8, 2009
Handlery Hotel
950 Hotel Circle No.
Mission Valley
Randy Dahlin
Phone (619) 697-3000
Fax: (619) 337-8974
5262 Baltimore Dr
La Mesa, CA 91942
Email: rwdahlin@aol.com

San Diego

Friday
January 9, 2009
Handlery Hotel
950 Hotel Circle No.
Mission Valley
Randy Dahlin
Phone (619) 697-3000
Fax: (619) 337-8974
5262 Baltimore Dr
La Mesa, CA 91942
Email: rwdahlin@aol.com

North County

Saturday
January 10, 2009
California Center for the Arts
340 N. Escondido Blvd
Escondido, CA
Joanne Schroeder
Phone: (760) 740-0582 X104
Fax: (760) 740-0583
325 W. Third Ave, #104
Escondido, CA 92025
Email: tfs@sbcglobal.net

REGISTRATION: 7:30 a.m.
SEMINAR: 8:00 a.m. to 4:50 p.m.

The California Tax Education Council has recognized the California Society of Tax Consultants, as an approved curriculum provider. Successful completion of this course may be reported to fulfill the continuing education requirement of the California Business & Professions Code 22250-22259. This does not constitute an endorsement by the California Tax Education Council as to the quality of the course or its contribution to the professional competence of the preparer

CSTC-1040 RUNNING START 2009

Name: _____ Chapter: _____

Address: _____ City: _____ Zip: _____

E-mail: _____ Phone #: _____

Check #: _____ Amount \$ _____ **Make your Check Payable to: "CSTC"**

Credit card #: _____ Exp. Date: _____ Circle: (Visa or M/C)

ATTY CPA EA PA CTEC License # _____ Circle: Member / Non-Member

Seminar date please circle one: January 6th January 8th January 9th January 10th