



THE SOCIETY OF PROFESSIONAL ASSESSORS SEMINAR

at

The Newport Harbor Hotel & Marina – 49 Americas Cup Avenue - Newport, RI 02840

www.thenewport-hotel.com

Date: April 27-28, 2012

Fee: 85.00 – Member 100.00 Non – Member

Reserve your seat now

SATURDAY – April 27th

Morning Continental Breakfast and Spring Luncheon Included

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| 8:30 A.M. -8:45 A.M. | Registration, Continental Breakfast |
| 8:45 A.M. – 9:00 A.M. | Welcome from SPA President – Frank Bucino |
| 9:00 A.M. – 12:00 A.M. | Issues and Solutions in Real Estate Valuation Disputes
<i>Presenter: Gerald M Levy, MAI, CRE, FRICS</i>
<i>Donald Liebman, Esq.</i> |
| 12:00 P.M. – 1:00 P.M. | Luncheon – Provided by Newport Harbor Hotel & Marina |
| 1:00 P.M. – 2:30 P.M. | The Economy and Financial Markets; Crawling out of Recession
<i>Presenter: David Wyss, Visiting Fellow - Brown University</i> |
| 2:30 P.M. – 4:00 P.M. | Business Incentives
<i>Presenter: Paul Lo, Director, WTP Advisors</i> |

SATURDAY – April 28th

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| 9:00 A.M. – 12:00 P.M. | <i>Emerging Tax Policies</i>
<i>Roundtable Format – Shelby Jackson, Moderator</i> |
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Note: Friday April 27th - 5 Connecticut Credits Approved for Assessors, 1 hour pending.
Credits for Friday and Saturday - New Jersey and Rhode Island, 9 hours

Check for updates at: www.societyofassessors.org

Society of Professional Assessors

CONTINUING EDUCATION PROGRAM – 5 Hours

The Newport Harbor Hotel & Marina
49 Americas Cup Avenue
Newport, Rhode Island 02840
www.thenewport-hotel.com
800-955-2558

Friday, April 27, 2012

Fee: \$85.00 – Member \$100.00 Non-Member

Reserve your seat now – you may present your voucher at the door

Morning Continental Breakfast and Full Luncheon Included

**RESERVE YOUR SEAT AHEAD OF TIME BY PHONE, FAX OR EMAIL:
Carol Ann Tyler, Treasurer**

Then, simply complete the registration form below and return with your payment to:

***Society of Professional Assessors
Treasurer
PO Box 771
Westbrook, CT 06498-0771***

***Phone: 860-267-2510
Fax: 860-267-1027
Email: c Tyler@societyofassessors.org***

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Please send a completed form for each attendee

Make Checks Payable to: Society of Professional Assessors

Name/Title: _____

Address: _____

City/State/Zip: _____

Municipality/Firm: _____

Phone Number: _____ Fax Number: _____

E-mail: _____

Amount Enclosed: _____

Voucher No.: _____