



Get to know your ABCs (Attorneys, Bankers, and CPAs) at the

# 4th Annual ABC Trivia Night

August 3, 2017 • 5:30 – 7:30 PM  
Pierremont Oaks Tennis Club

*Save when you register by July 31!*

Join us for an evening of fun, facts, food, and refreshments at the **ABC (Attorneys, Bankers, and CPAs) Trivia Night** brought to you by the Society of Louisiana CPAs Shreveport Chapter’s Emerging CPA Council and the Young Lawyers Section of the Shreveport Bar Association. This event is open to all attorneys, bankers, and CPAs (public practice, industry, education professionals) in the Greater Shreveport-Bossier area. Come enjoy a relaxed — and slightly competitive — evening with other local young professionals. Door prizes and trophies will be awarded.

**When:** Thursday, August 3, 2017  
5:30 – 6:00 PM Registration and Happy Hour • 6:00 PM Trivia Begins

**Where:** Pierremont Oaks Tennis Club  
578 Spring Lake Dr., Shreveport, LA 71106

**Cost:** Early Registration \$25 After 7/31 \$40  
Heavy hor d’oeuvres and two drinks included in ticket price  
Cash bar available.

**Register:** Return completed form with payment by July 31.  
Checks and credit cards accepted at the door,  
but advanced registration is requested.  
Want to register/pay for a group? Contact [laldrich@hmvcpa.com](mailto:laldrich@hmvcpa.com).



**LCPA Shreveport Chapter  
Emerging CPA Council**  
Lauren Aldrich, CPA  
[laldrich@hmvcpa.com](mailto:laldrich@hmvcpa.com)



**Young Lawyers Section  
Shreveport Bar Association**  
Gahagan Pugh  
[gahagan@thepughlawfirm.com](mailto:gahagan@thepughlawfirm.com)

### Sponsorship Opportunities Available!

(\$250 includes company logo on event page and on display during event and 2 admissions. Contact [Lauren Aldrich](mailto:Lauren Aldrich) for details.)

## ABC (Attorneys, Bankers, & CPAs) Trivia Night Registration Form

Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Email: \_\_\_\_\_ **Early Registration \$25; After 7/31 \$40**

Please select your category: Attorney \_\_\_ Banker \_\_\_ CPA \_\_\_ Other \_\_\_

Visa \_\_\_ MasterCard \_\_\_ Discover \_\_\_ AmEx \_\_\_ Credit Card No: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ CSV No.: \_\_\_\_\_ Zip: \_\_\_\_\_ Total: \_\_\_\_\_

Check enclosed \_\_\_ (make checks payable to LCPA)

Email or mail completed form and payment to [Lauren Aldrich](mailto:Lauren Aldrich), PO Box 1607, Shreveport, LA 71165;  
payment accepted at door, but advanced registration is requested.