

February 2009



INDEPENDENT INSURANCE AGENTS AND BROKERS OF OC

February Quarterly Meeting

Ethical Training for the Insurance Professional

Provider Number: 21090 • Course Number: 190480

This four hour continuing education class complies with the CA DOI Ethics continuing education requirement. The course is presented in a discussion-type venue in which active participation by the students is required. The class will particularly focus on defining ethics and its application in the insurance business; how to identify and resolve ethical dilemmas; and how deal with conflicts of interest. Using a large catalog of actual insurance case studies as well as real-life situations, students will be presented with opportunities to wrestle with transactional and interpersonal situations involving an ethical issue, and demonstrate their personal approach toward successful resolution.

About the Speaker -

Kirk Denebeim is a wholesale insurance broker, Senior Vice President and principal of Socius Insurance Services, Inc. a wholesale insurance brokerage firm headquartered in San Francisco, with offices in Walnut Creek, Los Angeles, Chicago, Tampa Bay and Miami.

Kirk specializes in risk analysis and insurance placement for Employment Practices Liability, Directors & Officers Liability, Media and Technology Liability, Fiduciary Liability, and Errors & Omissions for all professions.

**Thursday
February 12, 2009**

Tustin Banquet Center
721 W. First St.
Tustin, CA
714.669.0506

Cost for the Seminar:

\$15 Members

\$35 Non-Members

Registration • Continental
Breakfast Networking:

7:30 - 8:30 am

Program:

8:30 - 12:30 pm

(Program to begin
promptly at 8:30 am)

This seminar routinely fills to capacity, so make your reservations now!

Register by Tuesday, February 10th to reserve your seat!

Please mail reservation form and check to:

Independent Insurance Agents and Brokers of Orange County (IIABOC)

1442 E. Lincoln Ave., PMB 441 - Orange, CA 92865-1934

Or pay online with a credit card at www.iiaboc.com

Name: _____ CA License: _____

Company / Agency: _____

Address: _____

City, Zip: _____ Phone: _____

Email: _____ Total Enclosed: \$ _____

Credit Card Number: _____

Signature: _____ Exp: ____ / ____

In accordance with Title III of the Americans with Disabilities Act, we invite all registrants to advise us of any disability and any requests for accommodation to that disability. Please submit your request as far in advance as possible for this seminar.

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