

# Meet Us In Orlando!

## 23<sup>rd</sup> Annual ACFE Fraud Conference & Exhibition

June 17-22, 2012

Attend *educational sessions*, earn *CPE credits* and *network* with other industry professionals at the *world's largest anti-fraud event*.

[www.fraudconference.com](http://www.fraudconference.com)

The Arizona Chapter wants to help you get there! We are once again coordinating team registrations so we can get a discounted rate. We are also offering grants to help pay for your out-of-pocket costs to attend the conference – visit the Scholarships & Grants page on our website for more information: [www.cfe-arizona.org](http://www.cfe-arizona.org).

Team pricing is for groups of three, five, or ten people registering together from the same chapter. This offer is available for Arizona chapter members, associates, and affiliates. You do not need to submit your payment to the chapter - the ACFE will bill each registrant. The only thing you need to do is submit your completed registration form to [president@cfe-arizona.org](mailto:president@cfe-arizona.org) before **Monday, April 2, 2012**. *(Even though you have plenty of time to submit your registration form, we recommend that you make your hotel reservations as soon as possible, as the hotels often sell out of the conference block rooms.)*

Team Registration – Full Conference			
	3 or more	5 or more	10 or more
ACFE Member	\$1,195 (USD)	\$1,095	\$995
Non-Member	\$1,395	\$1,295	\$1,195

Team Registration – Main Conference			
	3 or more	5 or more	10 or more
ACFE Member	\$795 (USD)	\$745	\$695
Non-Member	\$995	\$945	\$895

# 23<sup>rd</sup> Annual ACFE Fraud Conference and Exhibition



ORLANDO, FL | JUNE 17-22, 2012

## SECTION 1: ATTENDEE INFORMATION

Name (first, last) <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Email Address	
Name on Badge (e.g. James or Jim)	Phone	Fax
ACFE Member ( <input type="checkbox"/> Yes <input type="checkbox"/> No)? If Yes, Member #	Other Designations (CPA, etc.)	Address: <input type="checkbox"/> Home <input type="checkbox"/> Business
Company		
Title	City	State/Province Zip/Routing/Postal Code
	Country	

**Please indicate any special needs:**

**Dietary:**  Vegetarian  Kosher

**Physical:**  Please check here if you require special accommodations to participate and email a description of your needs by May 1, 2012 to [events@ACFE.com](mailto:events@ACFE.com). After May 1, 2012 we cannot guarantee we can accommodate your request.

## SECTION 2: MEMBERSHIP OFFER — Join now and save on registration fees!

<p><b>Attention Non-Members:</b> Sign up today for a one-year ACFE membership and save on registration fees for the Conference.</p> <p><input type="checkbox"/> Yes, I would like to join the ACFE, please accept my application. When registering for the conference, I will choose member rates.</p> <p><input type="checkbox"/> No, I do not wish to join the ACFE at this time and will pay the non-member conference registration fees.</p>	<p><b>Membership Dues</b></p> <p><input type="checkbox"/> Associate (US/Canada) ..... \$150</p> <p><input type="checkbox"/> Educator Associate* (US/Canada)..... \$40</p> <p><input type="checkbox"/> Student Associate** (US/Canada) ..... \$25</p> <p>For other country fees, visit <a href="http://ACFE.com">ACFE.com</a>.</p>
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**SECTION 2 TOTAL: \$**

Have you ever been convicted of a felony or misdemeanor involving moral turpitude, including convictions expunged ("Moral turpitude" means an offense that calls into question the integrity or judgment of the offender, such as fraud, bribery, corruption, theft, embezzlement, solicitation, etc.)?  Yes  No If so, please describe (attach written statement if necessary):

**New Members:** I certify that the above is true and correct to the best of my knowledge. Falsification of any information on this application is grounds for denial or revocation of membership. If this application is accepted, I agree to abide by the Bylaws and Code of Professional Ethics of the Association of Certified Fraud Examiners. Membership is a privilege and not a right. Qualifications are established by the Board of Regents, whose decisions are final. I consent to the storage of my personal data in ACFE's offices in the United States, in its regional offices, and by its local chapters.

Signature \_\_\_\_\_ Date \_\_\_\_\_

SECTION 3: REGISTRATION PACKAGES	Early Registration <sup>†</sup> by March 30, 2012	Advanced Registration <sup>†</sup> by May 1, 2012	Standard Registration after May 1, 2012	Government Pricing
<input type="checkbox"/> <b>FULL CONFERENCE PACKAGE (June 17-22)</b> Includes the Main Conference and  <b>Pre-Conference (choose one):</b> <input type="checkbox"/> Conducting Internal Investigations: Planning and Logistics <input type="checkbox"/> Creating an Effective Work Product for the Courtroom <input type="checkbox"/> Planning and Conducting Vendor Audits  <b>Post-Conference (choose one):</b> <input type="checkbox"/> Auditing/Investigating Fraud Seminar <input type="checkbox"/> Contract and Procurement Fraud <input type="checkbox"/> Investigating on the Internet	ACFE Members: \$1,295  Non-Members: \$1,495	ACFE Members: \$1,395  Non-Members: \$1,595	ACFE Members: \$1,495  Non-Members: \$1,695	ACFE Members: \$1,275  Non-Members: \$1,475
<b>INDIVIDUAL EVENT PACKAGES</b> <input type="checkbox"/> <b>Pre-Conference Only — June 17 (choose one):</b> <input type="checkbox"/> Conducting Internal Investigations: Planning and Logistics <input type="checkbox"/> Creating an Effective Work Product for the Courtroom <input type="checkbox"/> Planning and Conducting Vendor Audits  <input type="checkbox"/> <b>Main Conference Only (June 18-20)</b>	N/A	N/A	ACFE Members: \$350  Non-Members: \$450	N/A
	ACFE Members: \$895  Non-Members: \$1,095	ACFE Members: \$975  Non-Members: \$1,175	ACFE Members: \$1,095  Non-Members: \$1,295	ACFE Members: \$825  Non-Members: \$1,025

SECTION 3: REGISTRATION PACKAGES (cont.)		Standard Registration only	
<input type="checkbox"/> <b>Post-Conference Only — June 21-22 (choose one):</b> <input type="checkbox"/> Auditing/Investigating Fraud Seminar <input type="checkbox"/> Contract and Procurement Fraud <input type="checkbox"/> Investigating on the Internet		ACFE Members: \$695	Non-Members: \$845
<b>COMBO EVENT PACKAGES</b> <input type="checkbox"/> <b>Option 1: Main and Pre-Conference — June 17-20 (choose one):</b> <input type="checkbox"/> Conducting Internal Investigations: Planning and Logistics <input type="checkbox"/> Creating an Effective Work Product for the Courtroom <input type="checkbox"/> Planning and Conducting Vendor Audits		ACFE Members: \$1,195	Non-Members: \$1,395
<input type="checkbox"/> <b>Option 2: Main and Post-Conference — June 18-22 (choose one):</b> <input type="checkbox"/> Auditing/Investigating Fraud Seminar <input type="checkbox"/> Contract and Procurement Fraud <input type="checkbox"/> Investigating on the Internet		ACFE Members: \$1,395	Non-Members: \$1,595

TEAM REGISTRATION PACKAGES	Register with 3 or more***	Register with 5 or more***	Register with 10 or more***
<input type="checkbox"/> <b>Option 1: Full Conference (June 17-22)</b>	ACFE Members ..... \$1,195 Non-Members..... \$1,395	ACFE Members ..... \$1,095 Non-Members..... \$1,295	ACFE Members ..... \$995 Non-Members..... \$1,195
<input type="checkbox"/> <b>Option 2: Main Conference (June 18-20)</b>	ACFE Members ..... \$795 Non-Members..... \$995	ACFE Members ..... \$745 Non-Members..... \$945	ACFE Members ..... \$695 Non-Members..... \$895

**SECTION 3 TOTAL: \$ \_\_\_\_\_**

**SECTION 4: NETWORKING EVENTS**

**Attendee Networking Reception**

Tuesday, June 19 • Hard Rock Live at CityWalk  
 Pre-register and pay for tickets (before conference): \$55 per person  
 Tickets at Conference: \$75 per person<sup>1</sup>  
 Complimentary round trip transportation included in ticket price.






\_\_\_\_\_ x \$55 = \_\_\_\_\_  
 (# of attendees) (Section 4 total)

Enjoy drinks and hors d'oeuvres while building your professional and social network at the Attendee Networking Reception. This event provides a great opportunity to meet new colleagues and potential clients and customers, as well as catch up with old friends in a relaxed, social setting.

**GRAND TOTAL SECTIONS 2, 3 AND 4: \$ \_\_\_\_\_**

**SECTION 6: METHOD OF PAYMENT**

**Yes**, I signed up to be a member of the ACFE and would like to sign up for Automatic Dues Renewal (ADR) and save 10% on my annual dues using the credit card provided.

Charge my (cards charged in U.S. dollars):     

Cardholder Name (as shown on card) \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date (month/year) \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip/Routing/Postal Code \_\_\_\_\_

Signature \_\_\_\_\_

- U.S. dollar check or money order enclosed (payable to the ACFE)
- Please bill me (must be paid prior to the event)
- Purchase order (Govt. and educational institutions only. Include a copy of PO)
- Wire transfer (contact the ACFE for banking details). Reference: \_\_\_\_\_

**TERMS AND CONDITIONS**

<sup>\*</sup>Must be employed by an institution of higher learning, as an educator, as the primary means of employment.  
<sup>\*\*</sup>Undergraduate students must be enrolled for at least 9 semester hours. Graduate students must be enrolled for at least 6 semester hours. Proof of current enrollment in a university is required.  
<sup>1</sup>Payment — Full payment is required in order to receive early registration discounts. You will receive your conference bag, course materials, name badge, event tickets (if registered) and any other event related materials on site at the registration area. Event fees do not include travel, lodging, incidentals and other meals.

<sup>\*\*\*</sup>**Group/Team Discounts** — Groups discounts are made available to groups of 3, 5, 10 or more registering together. To receive a registration fee discount for your team, all group members must register and submit payment at the same time.  
<sup>1</sup>The Attendee Networking Reception ticket price of \$55 per person is only valid if registered and paid for before the conference. Ticket price at conference is \$75 per person.  
**Guests** — All guests must register to attend any function and must be 21 years or older to attend any of the social events.

**SECTION 5: SESSION SELECTION**

Main Conference			
Monday, June 18	1st	2nd	3rd
<b>Block 2</b> 10:20 – 11:40 a.m.			
<b>Block 4</b> 1:40 – 3:00 p.m.			
<b>Block 5</b> 3:30 – 4:50 p.m.			
Tuesday, June 19	1st	2nd	3rd
<b>Block 7</b> 10:20 – 11:40 a.m.			
<b>Block 9</b> 1:40 – 3:00 p.m.			
<b>Block 10</b> 3:30 – 4:50 p.m.			
Wednesday, June 20	1st	2nd	3rd
<b>Block 11</b> 8:30 – 9:50 a.m.			
<b>Block 12</b> 10:10 – 11:30 a.m.			
Auditing/Investigating Fraud Seminar			
Thursday, June 21	1st	2nd	
<b>Block 15</b> 10:05 – 11:25 a.m.			
<b>Block 17</b> 12:25 – 1:45 p.m.			
<b>Block 18</b> 2:00 – 3:20 p.m.			
Friday, June 22	1st	2nd	
<b>Block 21</b> 10:05 – 11:25 a.m.			
<b>Block 23</b> 12:25 – 1:45 p.m.			
<b>Block 24</b> 2:00 – 3:20 p.m.			

**Education Session Selection** — Registered attendees will be notified of their educational selections once their personal agenda has been finalized. Auditing/Investigating Fraud Seminar tracks and sessions can be viewed online at [FraudConference.com/23rd-Post.aspx](http://FraudConference.com/23rd-Post.aspx).

By registering for this event, I grant the ACFE or anyone authorized by the ACFE, the right to use or publish in print or electronic format, any photographs or video containing my image or likeness for any promotional purpose, without compensation. Association of Certified Fraud Examiners, ACFE and the ACFE logo are trademarks owned by the Association of Certified Fraud Examiners, Inc.

**Cancellation Policy** — Our cancellation policy is intended to keep costs low for attendees. Due to financial obligations incurred by ACFE, Inc. you must cancel your registration prior to the start of the event. Cancellations received less than 14 calendar days prior to an event start date are subject to a \$100 administrative fee. No refunds or credits will be given for cancellations received on or after the start date of the event. Those who do not cancel and do not attend are responsible for the full registration fee. Terms and conditions are subject to change without notice. Visit [ACFE.com](http://ACFE.com) for the latest updates.

**ARIZONA ASSOCIATION OF CERTIFIED FRAUD EXAMINERS  
CHAPTER GRANT  
2012 APPLICATION**

The Arizona Chapter of the Association of Certified Fraud Examiners is committed to providing financial assistance to our membership for continuing education and professional development efforts. Each year, a certain amount of money will be allocated for use towards these endeavors. The intent of the Grant is to assist our members with their individual out-of-pocket expenses, not to replace entity funding (no reimbursement will be made to any public agency or private company). Grant funding may be applied towards registration reimbursement of ACFE events or the ACFE certification software.

*Applications will be accepted throughout the year until the allocated grant funds are awarded.*

All applicants applying for an AZ ACFE Grant must be a current member in good standing with the Chapter and the National Association. The Grant process is competitive and awards will be made at the discretion of the Grant Committee based on justification and merits of each application in accordance with the criteria as stated below:

- Applicant shall submit an original, typed essay of at least 300 words explaining how attending the applicable training or becoming a Certified Fraud Examiner (CFE) is relevant to their professional career development. The essay will be evaluated on the applicant's goals:
  1. Demonstrate a commitment to furthering your education in Fraud Awareness and relevance to your current position
  2. Express a desire to assume increased responsibility and/or participation within the Chapter
  3. Identify how the knowledge & technical expertise gained through this training may be shared with the membership (i.e., through an article, presentation, etc.).
  4. Applicant shall provide the extent of financial support available from employer, or provide certification (below) where no financial support is available.
  5. Applicant shall provide a brief summary of their personal goals and how this grant will help achieve them.
  
- Applicant shall provide one letter of professional reference which attests to their character and professionalism.
  
- Applicant shall submit a current resume.

*The recipients of the Chapter Reimbursement Grants will be announced periodically throughout the year.*

***NOTE: Recipients must submit proof of event attendance (i.e., a CPE Certificate). If a recipient fails to attend the event, or fails to provide proof of attendance, the awarded grant must be returned within 30 days. If the recipient chooses to use the grant money for the CFE Certification software the grant money will be sent to you upon passing the CFE Exam.***

The following persons are ineligible to receive an AZ ACFE Reimbursement Grant:

- Previous recipients of an AZ ACFE Chapter Scholarship or Grant or the National Ritchie-Jennings Memorial Scholarship.
- Current Officers or Directors of the AZ ACFE or AZ ACFE Scholarship Committee, and members related to any current Officer or Director
- Members related to any current Officer or Director of the National ACFE; the National ACFE Foundation; or to any member of the National ACFE Foundation Scholarship Committee.

Please complete the following fields. Print legibly or type:

**Full Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Permanent address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Place of Employment:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Application is for:** \_\_\_\_\_

**Disclosure of Financial Support (required, if applicable):**

I, \_\_\_\_\_, \_\_\_\_\_ of the \_\_\_\_\_

(Supervisor's Name, Title) (Employer Name)

Do hereby certify that the \_\_\_\_\_ will not be providing any financial support

(Employer Name)

to \_\_\_\_\_ to attend the \_\_\_\_\_ to be held

(Applicant Name)

(Title of Training Event)

On \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Event Date)

(Supervisor Name)

(Date of Certification)

*I certify that all of the information on this application and related enclosures is true and correct. I understand that it is my responsibility to ensure that all required components of my Grant application package are complete. I understand that the decision of the AZ ACFE Grant Committee is final and not subject to review or challenge.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Questions regarding this Grant and Grant Applications should be e-mailed to:

[acfeazgrants@gmail.com](mailto:acfeazgrants@gmail.com)

Completed Application packets should be submitted in one envelope addressed to:

The AZ ACFE, Attn: Grant Committee P.O. Box 65241, Phoenix, Arizona