

California Board of Accountancy 2450 Venture Oaks Way, Suite 300

Sacramento, CA 95833

phone: (916) 263-3680 fax: (916) 263-3675 web: www.cba.ca.gov



ATTEST EXPERIENCE EVIDENCE TYPE C APPLICANTS¹

PLEA	SE ITPE OR PRINT						
FULL I	NAME (No Initials) (First) (N	Middle) (Las	t)				
FIRM	FIRM NAME (If any)						
I IIXIVI I	Will (II ally)		CONNENT III				
BUSINESS ADDRESS (Including City, State, and Zip Code)							
DAVTI	ME TELEPHONE NUMBER		Approximate Number of Ve	oro Dro	otioin a		
DATTIME TELEFTIONE NOWIDER			Approximate Number of Years Practicing Public Accountancy				
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`	,						
			I				
Pursuant to Business and Professions Code (BPC) section 5095, to be authorized to sign reports on attest engagements you							
must have completed a minimum of 500 hours of experience in attest services that demonstrates your understanding of the							
must nave completed a minimum of 500 hours of experience in attest services that demonstrates your understanding of the requirements of planning and conducting a financial statement audit or perform other attest services with minimum supervision.							
requi	rements of planning and conducting a infancial statem	ient addit of perform other attest s	ervices with minimum su	-	011.		
				Yes	No		
ı.	Have you participated in the planning of an audit, inc	cluding the selection of the procedu	res to be				
	performed?						
п.	Have you applied a variety of auditing procedures ar	nd techniques to the usual and cus	tomary financial				
	transactions included in financial statements?		,				
III.	Have you participated in the preparation of working	papers in connection with the vario	ous elements of I. and				
	II. above?						
IV. Have you participated in the preparation of written explanations and comments on the work performed and							
	its findings?	•	,				
٧.	Have you participated in in the preparation of and re	porting on full disclosure financial	statements as part of				
	the Audit or other Attest Services? This does not inc						
	preparation engagements in accordance with the pre						
	and Review Services (SSARS)?		9				
VI.	Have you ever signed an attest report on behalf of you	our firm?					
VI.	nave you ever signed an attest report on behalf of yo	our min?					
I hereby certify, under penalty of perjury under the laws of the state of California, that I met the experience requirement in BPC							
section 5095, prior to the submission of the Type C application for licensure, and that all statements and representations on this							
form are true and correct.							
SIGNATURE		DATE					

¹ Application Type C applicants who have a valid license in a state other than California and have been active and in good standing for at least four of the last ten years.

Please provide below a list of engagements, and dates for engagements, in which you have participated for the last four years.							
PLEASE TYPE OR PRINT							
ENGAGEMENT NAME (FIRM)	DATES						

APPLICANT NAME: _____