

North Carolina State Board of Certified Public Accountant Examiners

REQUEST FOR INACTIVE STATUS

(No annual renewal fee, CPE, or return of CPA certificate required)

Inactive status is effective immediately upon submission of this form.

NC CPA Certificate Number				
Mailing Address (Street or PO Box a	and City, Sta	te, Zip Code	e)	
Daytime Telephone Number:				
Email Address:				
Is this a change of address?	_Y	N		
Do you want to receive the Board's	newsletter by	y email? _	Y	N
(CPA) or allow anyone to refer to Carolina or as an inactive CPA indirectly, or through third parties, "a identification" to identify myself as representation includes, but is not reports, business cards, brochures advertisements, news articles, puexperience or character affidavits of CPA associations, displayed CPA certificates or licenses from other of Public Accountant' by the [my] name	. I will not a any words, less being licent limited to, 's, resumes, oublications, I for exam or A licenses forganizations e."	etters, abbreased as a 6the use office signs, istings, tax certificate a from this o which have	use, in writing viations, symbol CPA or as an of titles or legal telephone directory signat pplicants, displayed any other sette designation	or orally, directly or ols or other means of inactive CPA. Such ends on letterheads, ectories or any other ures, signatures on ayed membership in state, and displayed on 'CPA' or 'Certified
An individual who is licensed as a North Carolina and does not have a North Carolina CPA certificate and NCGS 93-10.	n office in No	orth Carolina	a may request ii	nactive status of their
I affirm that I will not identify mysel CPA to any person in any manner am on inactive status. I affirm that the	as specified	in 21 NCAC	C 08A .0308(a)	and (b) as long as I
Signature			 Date	

For your convenience, you may email this completed form to aliceg@nccpaboard.gov.