North Carolina State Board of Certified Public Accountant Examiners

1101 Oberlin Road Suite 104 • PO Box 12827 • Raleigh NC 27605 Phone 919-733-1423 • Fax 919-733-4209 • Web nccpaboard.gov

AFFIDAVIT OF LOST OR DESTROYED CPA FIRM REGISTRATION CERTIFICATE

l,	, acknowledge that the firm registration certificate	
(your name)		
for	, a North Ca	rolina
(CPA firm name)		
CPA firm for the year, was	either lost or destroyed on	
(year)	(month/day/year)	
been unable to locate the registration immediately return it to the Board's office	istration certificate granted to the above-named CPA to certificate. I affirm that should this certificate be leat 1101 Oberlin Road, Suite 104, Raleigh, NC 27605, neral Statutes to refer to the firm as a CPA firm unlead State Board of CPA Examiners.	ocated, I will I understand
Date: Signa	ature:	
	State	
	County	
Signed and sworn to (or affirmed) before n	ne this day by Name of Person Signing Form	·
Witness my hand and official seal, this the	day of, 20	·
	Official Signature of Notary	Notary Public
	Notary's printed or typed name	Trotaly I ublic
	My commission expires:	