

**California Board of Accountancy
Modified Text**

*Originally proposed changes = underline/strikeout
New Modifications to proposed changes = double underline/double strikeout*

Proposed Regulatory Language

(a) Beginning on January 1, 2014, at the time of renewal, a licensee firm, as defined in Section 5035.1, shall report to the Board specific peer review information as required on Form PR-1 (Rev. ~~44/4769/19~~), which is hereby incorporated by reference.

~~(b) Prior to January 1, 2014, the date for existing California licensees to report peer review results, on the form indicated in subsection (a), shall be based on the licensee's license number according to the following schedule: for license numbers ending with 01-33 the reporting date is no later than July 1, 2011; for license numbers ending with 34-66 the reporting date is no later than July 1, 2012; for license numbers ending with 67-00 the reporting date is no later than July 1, 2013.~~

(~~cb~~) A licensee's or firm's willful making of any false, fraudulent, or misleading statement, as part of, or in support of, ~~his/her~~ the firm's peer review reporting shall constitute cause for disciplinary action pursuant to Section 5100(g) of the Accountancy Act. Failure to submit a completed Form PR-1 (Rev. ~~44/4769/19~~) shall be grounds for non-renewal or disciplinary action pursuant to Section 5100(g) of the Accountancy Act.

NOTE: Authority cited: Sections 5010 and 5076, Business and Professions Code.
Reference: Sections 5035.1, 5076, and 5100, Business and Professions Code.

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PEER REVIEW REPORTING FORM
LICENSEE/FIRM INFORMATION

1. ~~Licensee/Accounting Firm Name:~~ _____
(If operating as a sole proprietorship (and not registered as with the CBA as a corporation) complete using your individual license information.)

~~2. Licensee Name:~~ _____

~~2.32. Business Telephone #:~~ _____

~~343. Business E-mail Address:~~ _____

~~4.54. License Number:~~ _____

~~565. License Expiration Date:~~ _____

~~676. Does the licensee operate as an~~ **Select the type of accounting firm? below:**

(If you are working independently as a sole proprietor, check sole proprietorship.)

~~NO~~ (Check one below and go to number 15);

~~YES~~ (Select firm type below, then go to number 7):

~~Employee, partner or shareholder of an accounting firm~~

Sole Proprietorship

~~Employee, partner or shareholder of a non-accounting firm~~

General Partnership

~~Employee of the Government~~

Limited Liability Partnership

~~Unemployed or retired~~

Corporation

~~Other _____~~

~~7. Number of shareholders, partners, owners, and full-time licensees of the firm:~~

1 2 3 4

5-10 11-19 100+

~~87a. Has the firm performed accounting and auditing services, as defined in Section 39(a) of Title 16 of the California Code of Regulations, that require a peer review since the last license renewal?~~

~~Yes~~ (Go to number 8b)

~~No~~ (Go to number 152)

~~87b. If the firm completed its first accounting and auditing service within 18 months prior to the expiration date of the license, indicate the date the service was completed:~~ _____

(NOTE: The firm must have a peer review report accepted by a Board-recognized peer review program provider within 18 months of this date and report the results at the time of the next renewal)

(If applicable, go to number 152. If not applicable, go to number 98.)

PEER REVIEW INFORMATION

~~98. Date Last Peer Review Report Accepted:~~ _____

~~409a. Peer Review Report Rating:~~

~~Pass~~ (Go to question 1421a.)

~~Pass w/deficiencies~~ (Go to question 1421a.)

~~Substandard (Fail)~~ (Go to question 409b.)

PEER REVIEW INFORMATION (continued)

~~409b. Did your firm submit the peer review report to the Board within the required 45-day reporting period?~~

~~YES~~

~~NO~~ (Please attach a written explanation as to why the report was not submitted timely.)

~~11a. Was the peer review administered by the California Society of Certified Public Accountants using the American Institute of Certified Public Accountants' Peer Review Program? Yes NO (Go to question 11b)~~

~~11b. Was the peer review administered by another organization using the American Institute of Certified Public Accountants' Peer Review Program? Yes (Please provide the name of the American Institute of Certified Public Accountants' administering entity.) No (Please provide the name of the Board-recognized peer review program that administered the peer review.)~~

~~12. What was the highest level of accounting and auditing service your firm provided during the three-year period encompassing your peer review? Audit Review Compilations w/disclosures Compilations w/o disclosures prepared using GAAP Compilations w/o disclosures prepared using OCBAOA~~

~~13. What was the cost to have the peer review performed? \$ _____~~

~~14. How much time did your firm spend preparing for the peer review? 0 days 1-5 days 6-10 days 10+ days~~

~~11. Was the peer review administered by a Board-recognized peer review provider? Yes NO~~

~~452. I hereby certify, under penalty of perjury under the laws of the State of California, that all statements, answers, and representations on this form, including supplementary information attached hereto, are true, complete and accurate.~~

Signature

Date

PERSONAL INFORMATION COLLECTION AND ACCESS

The information provided in this form will be used by the California Board of Accountancy (CBA), to determine qualifications for a Certified Public Accountant License. Section 5080 and 5095 of the Business and Professions Code 5076 of the Business and Professions Code and Title 16 of the California Code of Regulations section 45 authorize the collection of this information. Failure to provide any of the required information is grounds for rejection of the application as being incomplete.

Information provided may be transferred to the Department of Justice, a District Attorney, a City Attorney, or to another government agency as may be necessary to permit the CBA, or the transferee agency, to perform its statutory or constitutional duties, or otherwise transferred or disclosed as provided in Civil Code Section 1798.24.

Each individual has the right to review his or her file, except as otherwise provided by the Information Practices Act. Certain information provided may be disclosed to a member of the public, upon request, under the California Public Records Act. The Executive Officer of the CBA is responsible for maintaining the information in this application, and may be contacted at 2450 Venture Oaks Way, Suite 300, Sacramento, CA 95833, telephone number (916) 263-3680 regarding questions about this notice or access to records.