

AFFIDAVIT FOR DUPLICATE KANSAS CPA PERMIT TO PRACTICE

I, _____, hereby request that a duplicate CPA permit be prepared for me, for the following reason(s):

____ Original CPA permit was damaged after being in my possession.

____ Original CPA permit was lost due to the following:

____ Original CPA permit was accidentally destroyed by the following method:

____ Requesting a name change to be made as follows:

(NOTE: A NAME CHANGE REQUIRES SUPPORTING DOCUMENTATION SUCH AS MARRIAGE CERTIFICATE, DIVORCE DECREE, ETC.)

____ Other (please explain) _____

FEE: \$25.00 FORM OF PAYMENT: CHECK CREDIT CARD

Credit Card (circle one): VISA MASTERCARD AMERICAN EXPRESS DISCOVER

CREDIT CARD # _____ **CVV** _____

EXP. DATE (MO/YR) _____

CARDHOLDER'S SIGNATURE FOR ACCURACY. (INACCURATE DATA WILL RESULT IN APPLICATION BEING RETURNED AS INCOMPLETE.)

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED IS TRUE AND ACCURATE.

Signed: _____

Street Address: _____

City _____ State _____

STATE OF _____

COUNTY OF _____

Signed and sworn to before me, a Notary Public, this _____ day of _____, 20____.

Notary Public

My Commission Expires: _____