



THE STATE  
of **ALASKA**

Department of Commerce, Community, and Economic Development  
Division of Corporations, Business and Professional Licensing

**CPA**

FOR DIVISION USE ONLY

**Board of Public Accountancy**  
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Website: [ProfessionalLicense.Alaska.Gov/BoardOfPublicAccountancy](http://ProfessionalLicense.Alaska.Gov/BoardOfPublicAccountancy)

**CPA: Continuing Education Record**

<b>Full Name:</b>					
<b>Alaska CPA License Number:</b>					
<p>By my signature below, I certify under penalty of perjury to the truth and accuracy of all representations made in this report. I understand that failure to comply with the CPE audit may result in discipline against my license.</p>					
<b>Total 2018 Hours:</b>		<b>Total 2019 Hours:</b>		<b>Combined Total Hours:</b>	
<p><b>Signature:</b> _____ <b>Date:</b> _____</p>					

For the 2018/2019 calendar years you are required to complete 80 hours of CPE in compliance with 12 AC 04.300-.400. At least 4 of the 80 hours must be in ethics.

Number your attached proof of completion documents corresponding to the item number in this list.

Please list items in date order (oldest to most recent). Hours claimed on a past renewal or as part of an agreement cannot be claimed.

<b>1.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing
<b>2.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>3.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>4.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>5.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>6.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>7.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>8.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>Total 2018 Hours:</b>		<b>Total 2019 Hours:</b>		<b>Combined Total Hours:</b>	
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<b>9.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>10.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>11.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>12.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>13.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>14.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>Total 2018 Hours:</b>		<b>Total 2019 Hours:</b>		<b>Combined Total Hours:</b>	
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<b>15.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>16.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>17.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>18.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>19.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>20.</b>	<b>Course Activity or Title:</b>				
	<b>Sponsor or Provider:</b>				
	<b>Date Completed:</b>		<b>Hours Earned:</b>		<input type="checkbox"/> Teaching <input type="checkbox"/> Publishing

<b>Total 2018 Hours:</b>		<b>Total 2019 Hours:</b>		<b>Combined Total Hours:</b>	
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**Make additional copies as necessary.**