Arkansas State Board of Public Accountancy

101 East Capitol, Suite 450 • Little Rock, AR 72201

phone (501) 682-5532 • fax (501) 682-5538 • www.arkansas.gov/ASBPA

Quality Review Survey

QR16 - _____ License#_____

Your QR # is on your 2016 Quality Review Notification Letter.

_____

Print name as it appears on license card

*Please complete and mail the applicable forms with an attached copy of the **most recently issued report** since initial licensure by the Board or since your last Quality Review survey.*

Check one box for each of the six (6) types of reports.

1. Audit Report

- ☐ No reports issued
- ☐ Report Issued, exempt from reporting.
- ☐ Report Issued. Attach a copy of the report with accompanying financial statements (no work papers) for review, along with a completed Audit-Engagement Profile form, and the signed QR Survey. This includes an audit report for a contractor's license. Enclose fee.

2. Review Report

- ☐ No reports issued
- ☐ Report Issued, exempt from reporting.
- ☐ Report Issued. Attach a copy of the report with accompanying financial statements (no work papers) for review, along with a completed Review-Engagement Profile form, and the signed QR Survey. This includes an audit report for a contractor's license. Enclose fee.

3. Compilation Report with Disclosures

- ☐ No reports issued
- ☐ Report Issued, exempt from reporting.
- ☐ Report Issued. Attach a copy of the report with accompanying financial statements (no work papers) for review, along with a completed Compilation with Disclosures—Engagement Profile form, and the signed QR Survey. Enclose fee.

Name of accountant with final responsibility for this report: _____

4. Compilation Report without Disclosures

- ☐ No reports issued
- ☐ Report Issued, exempt from reporting.
- ☐ Report Issued. Attach a copy of the report with accompanying financial statements (no work papers) for review, along with a completed Compilation without Disclosures—Engagement Profile form, and the signed QR Survey. Enclose fee.

Name of accountant with final responsibility for this report: _____

Survey

5. **Report in Accordance with Government Auditing Standards**

☐ No reports issued

☐ Report Issued, exempt from reporting.

☐ Report Issued. Attach a copy of the report with accompanying financial statements (no work papers) for review, along with a completed Governmental Audit - Engagement Profile form, and the signed QR Survey. Enclose fee.

Name of accountant with final responsibility for this report: _____

6. **Agreed Upon Procedures**

☐ No reports issued

☐ Report Issued, exempt from reporting.

☐ Report Issued. Attach a copy of the report with accompanying financial statements (no work papers) for review, along with a completed Agreed Upon Procedures - Engagement Profile form, and the signed QR Survey. Enclose fee.

Name of accountant with final responsibility for this report: _____

See QR Survey Instructions - Exemption may be claimed from reporting if you have had an acceptable Peer Review Report completed between July 1, 2013 and June 30, 2016. Reports completed outside this date range do not qualify. Individuals should not return a Peer Review issued to a company unless it is a Sole Proprietorship. See Board Rule 14.

☐ Yes ☐ No Are you a Sole Proprietor?

I have enclosed the following fees for the enclosed reports:

☐ One Report	$100
☐ Two Reports	$150
☐ Three Reports	$200
☐ Four Reports	$250
☐ Five Reports	$300
☐ Six Reports	$350

Survey

_____ _____

Physical Address of surveyed license (no P.O. Boxes) Daytime Phone Number

_____ _____

Signature Date

* If your mailing address has changed, please visit our website and complete the online Individual Address Change form. Address changes will not be made from the Quality Review Survey.

Remember: If reports were issued please return the original, signed survey (this form) and include the report(s) with financial statements, completed engagement profile forms and the fees required **or** peer review and associated documents.