



INDIANA BOARD OF ACCOUNTANCY AUDIT PACKET

State Form 55904 (R3 / 8-24)



CPE Auditing Report Instructions

CPE Requirements:

List Continuing Professional Education (CPE) obtained in the following years:

January 1, 2021 – December 31, 2021
 January 1, 2022 – December 31, 2022
 January 1, 2023 – December 31, 2023

- A minimum of 120 total hours of instruction during the three (3) year reporting period of January 1, 2021 – December 31, 2023
- No less than twenty (20) hours completed per calendar year
- 10% of the total hours for the reporting period must be in Accounting and/or Auditing (A&A)
- No less than four (4) hours for the reporting period must be in Ethics
- No more than 50% of the required 120 hours for the reporting period will be accepted as self-study
- Hour requirements may be pro-rated for licensees initially issued during the reporting period (872 IAC 1-3-16)

Complete Our Worksheet(s):

- Report all CPE on the 2024 Continuing Professional Education Reporting Worksheet #1
Insert: Sponsor/Provider Name, Course Name, Date of course, and break down hours per type of Subject and add Total Hours for the course.
 - Use additional worksheets as needed to list additional documents.
 Worksheet Name: *Supporting Worksheet*
- Certificates of completion should state your name, sponsor of the program, date of attendance, and continuing education hours received. Copies of program booklets, handouts, receipts of payments, hotel receipts, or cancelled checks are not acceptable as proof of attendance. Please be sure to include your name and license number on each item submitted.

Upload completed worksheets and copies of CPE documents to our online portal:
<https://www.in.gov/pla/license/home/submit-document/>

Questions?

E-mail: pla14@pla.in.gov

Phone: 317-232-2960

IMPORTANT: When completing the Worksheet(s)... Identify how many hours are in each category (General, Ethics and/or A&A), THEN check the box beside the hours if they are Self-Study.



CPE Reporting Audit Worksheet #1

Part of State Form 55904 (R3 / 8-24)

This Worksheet #1 MUST be submitted along with copies of all documentations.

2024 Board of Accountancy Audit



LICENSEE INFORMATION

Name	License number
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CONTINUING EDUCATION LISTING

	Name of Sponsor / Provider	Course Name	Date	Subjects Hours (Check box if Self Study.)			Total hours	Office Use Only
				General Hrs.	Ethics Hours	A & A Hours		Verified (initial)
YEAR 2021				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
YEAR 2022				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
YEAR 2023				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Continue using additional worksheets, if necessary.	Total for each category:				
	Total for each category from other worksheet(s), if applicable:				
Signature	GRAND TOTAL of all categories combined:				

FOR BOARD OF ACCOUNTANCY USE ONLY

Review #1	STATUS
Review #2	Approved: _____ Denied: _____
Review #3	Other: _____

