PEER REVIEW COMPLIANCE REPORTING FORM

In accordance with Ohio Administrative Code 4701-13-11, Reporting submission of peer review reports, The Accountancy Board of Ohio requires all peer review firms to complete this form, and submit all required documents.

Name of Firm: __________________________________________  __________/_________
Firm ID number/ Federal EIN #

Does the Firm perform: ☐ Audits ☐ Compilations ☐ Reviews ☐ Attestation Engagements ☐ Yellow Book Audits
☐ ERISA Audits ☐ FDIC ☐ Audit Carrying Broker Deal ☐ SOC 1 & 2

List all other services the Firm performs for clients: ________________________________

PLEASE CHECK THE TYPE AND STATUS OF REVIEW COMPLETED

Type of review: ☐ System Review ☐ Engagement Review

Status of Review: ☐ Pass ☐ Pass with Deficiencies ☐ Failed

CHECK THE DOCUMENTS THAT WERE UPLOADED TO THE FIRM RENEWAL

PASS
☐ Peer Review Report
☐ Final Letter of Acceptance

PASS WITH DEFICIENCIES / FAILED REVIEW
☐ Peer Review Report
☐ Corrective Action Letter
☐ Was Corrective Action Required? YES ☐ NO
☐ Date Corrective Action to be Completed by: _____________
☐ Letter of Response
☐ Final Letter of Acceptance

DUE DATE FOR NEXT REVIEW: ________________

Officer, official title, or sole proprietor must sign below to certify the accuracy of the information.

________________________  ___________
Signature                          Date

Ohio Compliance form 10.2017