Philippine Institute of Certified Public Accountants – Metro Manila Region
G/F PICPA Building, 700 Shaw Boulevard, Mandaluyong City
Tel. Nos.: 7236313/7239225/7253337; Fax Nos.: 7236314/7238760; E-mail: info@picpammr.com
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CPA INFORMATION SHEET

This **CPA INFORMATION SHEET** is intended for completion by all registered CPAs whether or not PICPA members. The completion and submission of this form is solely for purposes of compliance with Section 30 of the Philippine Accountancy Act (RA 9298) and as prescribed by the Board of Accountancy and the Philippine Regulatory Commission. Completion and submission of this form does NOT result in any membership with PICPA nor with any other professional accountancy organization. For membership purposes, you can contact PICPA MMR Membership Committee c/o MMR Secretariat at (632) 725-3337. **Upon completion of this form, please fax to (632) 723-6314 / 723-8760.**

FOR PICPA MEMBERS ONLY: Please complete the box as indicated below. Non-PICPA members are not expected to write any entry on this section.

PERSONAL

CPA /PRC REG. No.: _____ PRC Reg. Date: _____

Name: _____
LAST FIRST MIDDLE

Birthday: _____ Sex: ☐ Female ☐ Male Civil Status: ☐ Single ☐ Married ☐ Widow ☐ Separated
mm dd yy

WORK INFORMATION

Company: _____ Position: _____

Company Address: _____

_____

Tel. No.: _____ Fax No.: _____ E-Mail: _____

PERSONAL INFORMATION

Home Address: _____

_____

Tel. & Cel No.: _____ Fax No.: _____ E-Mail: _____

Preferred mailing Address: ☐ Office ☐ Home Address

EDUCATION

	Year Graduated	Address
College: _____	_____	_____
Post Graduate: _____	_____	_____

FOR PICPA MEMBERS ONLY

Membership Affiliation:

Region: _____ Sector: ☐ Commerce & Industry ☐ Government

Chapter: _____ ☐ Education ☐ Public Practice

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Caloocan City	Mandaluyong City	Marikina City	Las Piñas City
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			Pasay City
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