

SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION  
**SOUTH DAKOTA BOARD OF ACCOUNTANCY**

301 East 14th Street, Suite 200, Sioux Falls, SD 57104  
Tel: 605.367.5770 Fax: 605.367.5773 accountancy.sd.gov

**AFFIDAVIT**

South Dakota CPA certificate number \_\_\_\_\_ was issued to me on \_\_\_\_\_. I represent to the South Dakota Board of Accountancy that I wish to relinquish my South Dakota CPA certificate, but the actual document has been lost or destroyed and is not in my possession. If, at any future date, the actual document should be found, I will turn it in to the South Dakota Board of Accountancy.

I understand that by voluntarily relinquishing my CPA certificate, I may not use the CPA designation in any manner or represent to any person or firm that I hold such certificate from South Dakota.

I understand that at any time in the future I wish to request reinstatement of my CPA certificate I may make application to the Board and if my original CPA certificate is not found, a replacement certificate must be issued and the fee for a replacement certificate specified in the rules at that time will have to be paid.

I, \_\_\_\_\_, certify under penalties of perjury to the truth and accuracy of the statements contained in this affidavit.

Subscribed and sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Notary Public

My Commission expires  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

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