



ACCOUNTANCY BOARD OF OHIO

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JOHN E. PATTERSON, EXECUTIVE DIRECTOR

CPA CERTIFICATE NUMBER:

CPA # _____

Wall Certificate Application

Please complete all parts of this application and submit along with a **check for \$15 for processing**. Please make your check or money order payable to the Treasurer, State of Ohio, and mail to the address listed above. Since certificates are ordered in large batches, please allow six (6) to eight (8) weeks for processing.

The following must be legible

NAME AS DESIRED ON WALL CERTIFICATE:

ADDRESS: _____

CITY: _____ **STATE:** _____

ZIP CODE: _____

You cannot submit the wall certificate application and fee of \$15.00 until you are certified.

(Please note: You may send licensure & wall certificate fee as one check.)