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### CPAX Private Company CPA Firm Evaluation

**Company:**

**Industry:**

**CPAX Financial Contact:**

**Current CPA Firm:**

**Approximate Annual CPA Fees:**

**Services Required (please circle all that apply):** Audit   Review   Compilation   Tax   Consulting

**Fiscal Year End:**

**Primary Accounting Software:**

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**Please answer the following questions indicating Yes (Y), No (N) or Unsure (U):**

We receive an acceptable level of service from our current CPA Firm   **Y N U**

We pay reasonable Fees for CPA Services   **Y N U**

We chose our current CPA Firm using an objective process   **Y N U**

Our current CPA Firm understands our company's business and industry   **Y N U**

We have operations at various locations   **Y N U**

We have multiple business entities or consolidated corporations   **Y N U**

We have foreign locations or entities   **Y N U**

We are considering a change in CPA Firms in the near future   **Y N U**

We have an RFP Process in place for the CPA Firm selection process   **Y N U**

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**Notes & Comments:**