## Complaint Form

This form is to be used to assist in supplying details regarding a complaint about a Chartered Professional Accountant of British Columbia (CPABC) member, former member, firm, former firm, or student. Please provide as much detail as possible to ensure we have adequate information to evaluate your concerns. If you have any questions about this form or our procedures, please contact Nancy Lis, Professional Conduct Case Manager, at 604.629.8374 or email nlis@bccpa.ca.

### 1. Contact Information of Person Filing the Complaint – *please print or type*

- **Mr.**  
- **Mrs.**  
- **Ms.**  
- **Dr.**

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surname:</td>
<td>____________________________________________________</td>
</tr>
<tr>
<td>First Name:</td>
<td>_________________________________________________</td>
</tr>
<tr>
<td>Company Name*:</td>
<td>____________________________________________________</td>
</tr>
</tbody>
</table>
  *If complaining on behalf of an organization |
| Position: | _________________________________________________   |
| Address: | _________________________________________________   |
| Contact Number(s)*: | _________________________________________________   |
  *Indicate if number is home, business or mobile |
| Email Address: | _________________________________________________   |

Please provide address for correspondence in connection with this complaint if different from above:

- **Address: _________________________________________________**

### 2. Information on CPA Member, Former Member, Firm, Former Firm, or Student – *if known*

- **Mr.**  
- **Mrs.**  
- **Ms.**  
- **Dr.**

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<td>Surname:</td>
<td>____________________________________________________</td>
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<td>First Name:</td>
<td>_________________________________________________</td>
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<td>Firm Name:</td>
<td>_________________________________________________</td>
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<tr>
<td>Address:</td>
<td>_________________________________________________</td>
</tr>
<tr>
<td>Contact Number(s)*:</td>
<td>_________________________________________________</td>
</tr>
</tbody>
</table>
  *Indicate if number is home, business or mobile |
| Email Address: | _________________________________________________   |
3. Details of Your Complaint

What is your relationship to the CPA Member/Firm/Student? (e.g. client, employer, employee, etc):
____________________________________________________________________________________

Is your complaint about: Accountancy related work ☐ Conduct outside of work ☐ Other 
____________________________________________________________________________________

Is this complaint the subject of a current legal dispute and/or proceeding? Yes ☐ No ☐

4. What is the Complaint?

Please attach your statement, set out in chronological order, reflecting the circumstances surrounding the complaint. Describe the situation as clearly and precisely as possible. You must tell us what you believe was done wrong and when (giving dates) or what the member/firm/student did that requires investigation. Please include documents (evidence) to support your complaint and any additional information you feel would be helpful.

Have you already raised this complaint with the individual or firm in writing? Yes ☐ No ☐

Please explain what steps you have taken to resolve your complaint informally or formally with the member/firm/student? Please include all relevant dates and tell us what the current status is*.

*Attach a separate sheet if more space is required

Details of any other organizations involved (that you have complained to about this matter):
If you have written a formal letter of complaint to anyone else regarding this same complaint, please indicate names and/or let us know whether you intend to copy this to anyone else*.

*Attach a separate sheet if more space is required
5. Complainant Declaration

Declaration for Complaint:
I declare to the best of my knowledge and belief the information and documents provided are true and correct.
I understand that CPABC may disclose the information in this complaint to the CPA member, former member, firm, former firm or student involved.
I understand that CPABC does not investigate issues relating to fee disputes.
I understand that CPABC cannot order compensation to me or redress from a CPA member, former member, firm, former firm, or student.

Complainant Signature:____________________________________ Date:____________________________________

Notes:
1. This complaint form has to be signed and filled out as completely as possible. Incomplete or unsigned forms may be returned to you.
2. Once completed, please email your full complaint, including your statement and all attachments to professionalconduct@bccpa.ca or you may mail your complaint package, marked “private and confidential” to:

Chartered Professional Accountants of BC
Professional Conduct
#800 – 555 West Hastings Street
Vancouver, BC  V6B 4N6