

**Continuing Professional Development Report
2009 Calendar Year**

To: The Institute of Chartered Accountants
of Newfoundland and Labrador
Attention: Director Member Services/Practice Advisor
95 Bonaventure Ave, Suite 501
St. John's NL A1B 2X5

During the 2009 calendar year, I have complied with the continuing professional development requirements prescribed in By-law 903 and Regulation 9002.

Name

Membership number

Signature

Date

-
- *This form must be completed, signed and submitted to the Institute office by February 15, 2010.*
 - *Automatic suspension from membership for non-reporting after a grace period of 30 days*