

PARTNER REPORTING WORKSHEET (MANDATORY FOR RENEWAL)

LICENSEE PARTNERS

FULL NAME (PLEASE PRINT OR TYPE)	LICENSE NO.	EXPIRATION	STATE	PARTNER	DATE OF ASSOCIATION OR DISASSOCIATION (COMPLETE AS APPLICABLE)

NON-LICENSEE PARTNERS

FULL NAME (PLEASE PRINT OR TYPE)	DATE OF BIRTH	PARTNER	DATE OF ASSOCIATION OR DISASSOCIATION (COMPLETE AS APPLICABLE)

PLEASE LIST ALL LICENSEE AND NON-LICENSEE PARTNERS.

PLEASE ENTER THE APPROPRIATE PARTNER CODE FOR EACH PARTNER AS FOLLOWS:

A – PARTNER(S) ASSOCIATED SINCE LAST RENEWAL. PLEASE PROVIDE DATE OF ASSOCIATION IN THE DATE COLUMN. FOR NON-LICENSEE PARNTER(S) ASSOCIATED SINCE LAST RENEWAL PLEASE PROVIDE DATE OF

ASSOCIATION IN DATE COLUMN AND BIRTHDATE IN DATE OF BIRTH COLUMN.

- D PARTNER(S) DISASSOCIATED SINCE LAST RENEWAL. PLEASE PROVIDE THE DATE OF DISASSOCIATION IN THE DATE COLUMN.
- N NO CHANGE IN PARTNER(S) SINCE LAST RENEWAL.

THE PARTNER REPORTING WORKSHEET MAY BE REPRODUCED IF ADDITIONAL SPACE IS NEEDED.

NOTICE: Effective July 1, 2012, the California Board of Tax and Fee Administration and the Franchise Tax Board may share taxpayer information with this agency. You are obligated to pay your state tax obligation and this application may be denied or your license may be suspended if the state tax obligation is not paid.