# Client Reference Form

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| ETF logo | **STATE OF WISCONSIN**  **Department of Employee Trust Funds**  **A. John Voelker**  SECRETARY | Wisconsin Department  of Employee Trust Funds  PO Box 7931  Madison WI 53707-7931  1-877-533-5020 (toll free)  Fax 608-267-4549  etf.wi.gov |

* A complete and separate Client Reference Form must be completed for each reference.
* Proposer must complete the first part of the Client Reference Form, filling in Proposer’s name, address, and the ETF RFP#.
* The person providing the reference must sign and date the form.
* The Client Reference Forms must be submitted with the Proposer’s proposal.
* The State reserves the right to contact the reference to verify information provided within the Client Reference Form and the proposal. If the State finds erroneous information, points may be deducted, or the proposal may be rejected.
* If the Client Reference Form is not completed in entirety, points may be deducted, or the proposal may be rejected.
* If a proposal is submitted without a Client Reference Form, points may be deducted, or the proposal may be rejected.
* The State reserves the right to use other known references other than those provided on the Client Reference Form.

**Proposer’s Information**

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| Proposer’s Company Name: |
| Proposer’s Auditor’s Name: |
| RFP ETF0060 Annual Audit of the Wisconsin Deferred Compensation Financial Statements and Notes |

**Client Information**

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| **Organization Name:** |
| **Organization Address:** |
| **Individual Providing this Reference:** |
| **Title:** |
| **Phone Number:** |
| **Email Address:** |
| **Reference Signature and Date:**  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Rate each of the following concerning this Company/Auditor’s performance using the ratings from 1-5.  5-Strongly Agree/ Very Positive, 4- Agree, 3- Neutral, 2- Disagree, 1-Failed | **Company Rating** | **Auditor**  **Rating** |
| 1. A quality audit report was delivered on time and within budget. |  |  |
| 1. The company/auditor provided open, and timely communications, and was responsive to our needs and requirements. |  |  |
| 1. The business relationship with this company/auditor was positive and cooperative, versus negative and adversarial. |  |  |
| 1. If this auditor gave Board or other presentations, they were clear and concise. |  |  |
| 1. I would choose to work with this company/auditor again. |  |  |