

**SECRETARY OF STATE
CORPORATIONS SECTION**



**PAYMENT FORM
FAX: 512-463-5709**

<i>FOR CUSTOMER USE ONLY</i> (PLEASE PRINT OR TYPE)		
Cardholder Name:		
Address:		
City :	State:	Zip:
Phone No.: ()	Fax No.: ()	
TYPE DOCUMENT TO BE FILED:	ENTITY NAME(s):	
SHIP TO ADDRESS: <i>(if different than Address above)</i>	EXPEDITED HANDLING REQUESTED: <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Additional charge of \$25 per document for expedited service)</i>	
SELECT PAYMENT TYPE AND PROVIDE REQUESTED INFORMATION		
Charge to: Secretary of State Client ID No.: <i>(if applicable)</i>		
Charge to: <input type="checkbox"/> VISA® <input type="checkbox"/> MasterCard® <input type="checkbox"/> Discover®	Charge to: <input type="checkbox"/> LegalEase SM	
* Fees paid by credit card are subject to a convenience fee (currently 2.7%) of the total fees incurred.	* For information about LegalEaseSM, call 1-800-253-5749	
Card No.: - - -	Card No.: 5 0 0 6 7 9 - - -	
Expiration Date: / (MO/YR)	Client No.:	Case No.:
Signature:	Signature:	
Client Reference: <i>(if applicable) (Not Secretary of State Client ID No.)</i>		
<i>FOR SECRETARY OF STATE USE ONLY</i>		
	AMOUNT	BATCH NUMBER:
FILING FEE		
EXPEDITED HANDLING FEE		
TOTAL AMOUNT	\$	