



ROSS MILLER
Secretary of State
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ePayment Checklist (For Counter, Fax and Mail Requests)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Service Type: Counter Mail Fax

Order Processing Requested: **(Expedite Processing Requires Additional Fees)**
 Regular Processing **24-HOUR** Expedite **2-HOUR** Expedite **1-HOUR** Expedite

Payment by Card (card holder name and billing address required below)

Card Type: VISA MasterCard Discover American Express

Customer Credit Card Number: [16 digit grid] V CODE* [4 digit grid]

* 3-digit number found on the far right of the backside of VISA, MasterCard and Discover cards
4-digit number found on the front right side of American Express card.

NOTICE: For security and verification purposes, all credit card payments must include the 3 or 4-digit CVV2 code (VCode) number located on the credit card. Failure to include this code will result in the rejection of your filing or service request.

Credit Card Expiration Date: Month [] Year []

Amount to Charge Card: USD \$ []

Order Information (required)

Entity Name/Order Reference: []

Card Holder Information:

Name as it Appears on the Account []
Billing Address []
City, State, Zip []
Telephone []

Payment Authorization

I authorize the Secretary of State to bill an amount not to exceed the following to be charged to the above listed account(s):

X

Authorized Signature

Not to Exceed Amount: USD \$ []