Please Print and FAX the completed form to: (775) 841-2065

CORPORATE KIT ORDER FORM

Please provide the following contact information

Name					
Firm Name					
Street Address					
City	St	tate	Zip		
Phone					
Fax					
E-Mail					
Shipping Address: Please e	nter a shipping ad	dress if di	fferent tha	an above.	
Name					
Firm Name					
Street Address					
City	St	tate	Zip		
Phone					
Name of Incorporation					
	All Capital Letters	Upper & Lo	ower Case		
State of Incorporation					
Year or Full Date	(full date only necessary for CA & HI)				
Type of Organization					
Type of Corporate Kit - (S	elect Color from	Drop-Dov	wn Box)		
Thrift Kit (Vinyl)					
Corp Kit (Hot Stamped)					
Royal Kit (Metal Hinge)					
Deluxe Kit (Post Binder)					
Regal Leather (Genuine Leather)					

Options							
W/Bylaws	W/Membership	No Forms	No Corporate Seal				
No Certificates	Corp Seal Only	Estate Organizer					
Certificates Only From # to #							
Shares							
# of authorized shar	es (1)	Par Value	No Par				
# of authorized shares (1)		Par Value	No Par				
Stock Designation	Common Pr	referred Undesigna	ted				
Multi Class Ref	Multi Class Reflection						
Non-Reflecting	(to be used only v	vhen you have multip	ole classes of stock)				
Certificates Signe	d Rv:						
_	-	cretary Other					
Claused Designation	ation Clause for Mu	altiple Classes of Stoc	k New York PC Clause				
	Nevada Section 2510F & H and 418C Securities Act of 1933						
Special	sample (FAX US)						
Shipping:							
Airborne AM		Airborne 2nd Day					
Airborne SDS		UPS					
Order to be filled	by credit card						
Credit Card #							
Credit Card Typ	e						
Expiration Date							
Signature:		Date: _					
Name on Card							
Billing Address							
City							

	State
	Zip
Spe	cial Instructions
•	