



\*230104\*



ROSS MILLER  
Secretary of State  
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Website: www.nvsos.gov

# 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:

V CODE\*

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\* 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 \$