

INDIANA SECRETARY OF STATE

Information Request Form

Requester Information

Date of Request:		
Name:		
Address Line 1:		
Address Line 2:		
City:	State:	Zip Code:
Phone:	Email (SOS use only):	

Order Information

Business Name:	Business ID:
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*Business name must be the entity's full legal name as it appears on record with the SOS.

	Certificate of Existence (<i>special instructions</i>):	\$30
	Certificate of Existence Long Form (<i>special instructions</i>):	\$30
	Certificate of Fact (<i>please state fact</i>):	\$15
	Due and Diligent Search (<i>special instructions</i>):	\$15

* In order to receive your request, please mail this form along with a check or money order payable to the Indiana Secretary of State for the total amount to:

Indiana Secretary of State
Attn: Certification Clerk
302 West Washington Street, Room E-018
Indianapolis, IN 46204

