

INCORPORATE CALIFORNIA NON PROFIT BY FAX

Instructions: Please complete and fax this sheet Toll Free: 1 (800) 520-7800 to begin the process of forming your California Non Profit Corporation. Spiegel & Utrera, P.A. will contact you to review your details and to provide answers to all your business formation needs.

CONTACT INFORMATION

Full Name: _____
Your daytime phone number: (____) _____ Your fax number (____) _____
Email address: _____
Your address: _____

INITIAL COMPANY DETAILS

Name of your Non Profit Corporation: _____
NATURE OF BUSINESS (Briefly describe what the Non Profit Corporation will do): _____

When we contact you please be sure to have the names, contact information and social security numbers of any additional parties that you would like to be included in the formation of your Non Profit Corporation.

California Non Profit Corporation \$324.95

Please **CIRCLE** Any Additional Services that you would like to be addressed when consulting with Spiegel & Utrera, P.A.:

- | | |
|---|---|
| <input type="checkbox"/> General Counsel Club & Registered Agent Service | <input type="checkbox"/> California Statement of Information |
| <input type="checkbox"/> Detours and Contradictions | <input type="checkbox"/> Certified California Statement of Information |
| <input type="checkbox"/> Charlie's Entrepreneurial Journey | <input type="checkbox"/> Security Agreement |
| <input type="checkbox"/> Service Agreement | <input type="checkbox"/> Perfecting the Lien Created by the Security Agreement –
Uniform Commercial Code |
| <input type="checkbox"/> Mail Forwarding Service | <input type="checkbox"/> Home Office Lease |
| <input type="checkbox"/> Non-Voting Members | <input type="checkbox"/> Motor Vehicle Lease |
| <input type="checkbox"/> Business Checking, Investment Account and
Delayed Debit Gold MasterCard | <input type="checkbox"/> Office Equipment Lease |
| <input type="checkbox"/> Federal Tax ID Number | <input type="checkbox"/> Employee Benefits and Policies |
| <input type="checkbox"/> D & B Number | <input type="checkbox"/> Employment Agreement |
| <input type="checkbox"/> Individual Taxpayer Identification Number (ITIN) | <input type="checkbox"/> Independent Contractor Agreement |
| <input type="checkbox"/> California New Hire Reporting | <input type="checkbox"/> 501(c)(3) Corporate Records Compliance |
| <input type="checkbox"/> California Sales Tax Number | <input type="checkbox"/> 501(c)(3) Application for Exemption with Internal Revenue
Service |
| <input type="checkbox"/> California Unemployment Tax Account Number | <input type="checkbox"/> Solicitation of Contributions |
| <input type="checkbox"/> One Time Use of Spiegel & Utrera, P.C. Address | <input type="checkbox"/> Corporate Franchise Tax Exemption Application – Avoid the
Annual \$800 California Minimum Franchise Tax |
| <input type="checkbox"/> Indemnification Agreement | |
| <input type="checkbox"/> Lender's Agreement & Promissory Note | |

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SPEED OF SERVICE

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- NO RUSH - Please provide me with your regular 2-3 week service.
IN A HURRY - Please provide me with your Fast Corp Service (3-4 Business Days!)
NEXT DAY - Please provide me with a Next Day Corporation

SHIPPING DETAILS

Corporate Packages may be shipped to you via Regular (2-3 day) Service, via Overnight Delivery or may be picked up at anyone of our office locations.

PAYMENT OPTIONS

After we review your order, how will you be paying for this service? Please provide payment information. **Please note NO charges will be processed until you are contacted by Spiegel & Utrera, P.A.**

Credit Card: ___ VISA ___ MasterCard ___ American Express ___ Discover ___ PayPal ___ Western Union

Credit Card Number: _____

Expiration Date: _____ Card ID Number: _____

Name on Credit Card: _____

Billing Address on Credit Card: _____

Authorized Signature: _____

To place this order online please visit us at www.AmeriLawyer.com