

Instructions for properly completing a Filing Memo

Mark the appropriate priority box. (Additional Expedited Cost)

Fees:	Priority 1 (One hr) -	\$1000.00
	Priority 2 (Two hr) -	\$ 500.00
	Priority 3 (Same Day) -	Varies – Please see fee schedule
	Priority 4 (24 hour) -	Varies – Please see fee schedule

Submitters Information

Completely fill out your individual or business/firm name and complete address. The attention line needs to be completed if a business or firm name is listed. Please include a phone number and/or email address in case our office needs to contact you.

Note: The account number is only to be completed by submitters that have an existing Depository account with the Division of Corporations. Please ignore this field if you do not have a Depository account.

Filing Information

Complete the name of the entity and the entity file number. If you do not have the file number, you may leave it blank.

Other Document Filing Information

Complete this section if requesting additional items, such as certified copies, good standing, certificate of fact (i.e., re: merger, re: change of name), and if an apostille/gold seal is needed on such certificate for use in a foreign jurisdiction.

Method of Return

All documents are returned Regular Mail or you can provide a Fed-X or UPS account number for express mail. Please mark the appropriate method of return.

Credit Card Information

All credit card information must be completed. If the credit card information is not the same as it is listed with the submitter's information, then please specify the correct information in the comments/filings instruction area on the bottom right hand side of the memo. You must also include your 3-4 digit security code on the back of the card.

Please contact our office at 302-739-3073 with any questions or for verification of fees.

Return forms and memos to:

Delaware Division of Corporations
401 Federal Street - Suite 4
Dover, DE 19901

State of Delaware - Division of Corporations

DOCUMENT FILING SHEET - Fax# 302-739-3812

Priority 1
(One Hr)

Priority 2
(Two Hr)

Priority 3
(Same Day)

Priority 4
(24 Hour)

Priority 7
(Reg. Work)

<p><u>SUBMITTER'S INFORMATION</u></p> <p>Company/Firm _____ Or Individual's Name _____ Attention: _____ Return Address _____ City-State-Zip _____ Country _____ Phone: _____ Fax# _____ Email Address: _____ Account Number: _____</p>	<p>DO NOT WRITE IN THIS SPACE</p>
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DOCUMENT FILING REQUEST INFORMATION

Name of Company/Entity _____
 File Number _____ Reservation Number _____
 Type of Document _____

OTHER DOCUMENT FILING INFORMATION

OF Certified Copies returned _____
 Other _____
 ___ Good Standing
 ___ Long Form Good Standing
 ___ Apostille/Gold Seal
 Country _____
 ___ Re: _____
 Check# _____ Total \$ enclosed _____

METHOD OF RETURN
 (Fax or E-Mail is not available)

___ Messenger/Pickup
 ___ Fed Ex ___ UPS
 Account # _____
 ___ Regular Mail

CREDIT /DEBIT CARD INFORMATION
 (Visa, MasterCard, American Express or Discover Card Only)

CC# _____ / _____ / _____ / _____
 Expiration Date- _____ / _____ Security Code _____

COMMENTS/FILING INSTRUCTIONS

INSTRUCTIONS

1. Visit <http://corp.delaware.gov/cvrmemo.shtml> for complete Instructions on how to properly complete this memo
2. Fully shade in the required Priority Square using a dark pencil or marker, staying within the square.

EACH REQUEST MUST BE SUBMITTED AS A SEPARATE ITEM WITH THIS FILING SHEET AS THE FIRST PAGE OF EACH SUBMISSION