

STATE OF IDAHO
OFFICE OF THE SECRETARY OF STATE

**Application for Establishment of Pre-Paid Customer Accounts
With the Office of the Secretary of State**

Submit this form, along with the initial deposit to fund the pre-paid account. Deposit can be made by cash, check, money order or credit card.

TO: Secretary of State
Attn: Fiscal Division
PO Box 83720
Boise ID 83720-0080

The undersigned is a user of the services of the Secretary of State and desires to establish a pre-paid account from which payment for services may be made. The information required for establishment of the account is as follows:

1. The name of the entity or owner for the account:

2. The name of the individual who is responsible for maintenance of the account and with whom the Secretary of State can correspond is:

Telephone number is: _____ Fax number is: _____

3. The complete mailing address to which all statements and correspondence pertaining to the account may be sent is:

4. The email address to which all statements and correspondence pertaining to the account may be sent is:

5. This form will be returned to you after processing. Your customer account number will be printed in the block at the lower right with the caption "CT". Enter that number on all transmittals of documents or payments submitted by the account owner.

6. If any of the information above changes, please submit written notice of the change to the Secretary of State.

Account Owner

By

Date