



**IDAHO**  
SECRETARY OF STATE  
PHIL McGRANE

## SUBSCRIPTION APPLICATION/RENEWAL

Company Name \_\_\_\_\_

Name of Contact \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Username \_\_\_\_\_

(Note: You must establish a Username on our website [sosbiz.idaho.gov](http://sosbiz.idaho.gov))

Please mark whether this is a new application or a renewal.

- New Application       Renewal

Select which Subscription you are applying/renewing. Please refer to our website for the descriptions and pricing of each subscription.

- EFS Master List - \$60.00  
 Tax Liens - \$120.00  
 State Liens - \$30.00  
 Medical Liens - \$30.00

Payment is due with your application. Please select your preferred payment method.

- Check – Make payable to 'Idaho Secretary of State'  
 Credit Card – Please enter your email **OR** phone number (must be able to receive text) below. Once we receive your application, we will send you a link for you to enter your credit card information and submit back to us.

Email \_\_\_\_\_ Phone \_\_\_\_\_