

**Secretary of State Credit Card or Prepaid Payment Option/Return/Hold Sheet:** If you do not send an acknowledgement copy and a pre-addressed postage paid envelope with the filing or provide an email return on this form, you will not receive a credit card or prepaid account receipt from the Secretary of State's Office. Hold for pickup request will have the receipt attached. **Office personnel will not be able to search credit card or prepaid account transactions to help you balance your accounts.** Please do not use these options if you have problems collecting receipts from your filing agents. The document of record will be stamped showing the receipt of the filing fee and expedite fee but will not show convenience fees which will be charged by your card service provider (generally these fees are between 2% and 5% of the total charge).

**Information MUST be typed or filing will be returned without review.**

Entity Name: \_\_\_\_\_  
AL Entity ID #, required for all filings other than formation/registration: \_\_\_\_\_ - \_\_\_\_\_ (ex: 000-000)

Service Requested: \_\_\_\_\_ \$\_\_\_\_.00 \_\_\_\_\_ filing fee  
**(MUST be completed.)**      **Fee Amt.**      **Filing Type (or use the pymt. sheet on filing form)**

" \_\_\_\_\_ \$100.00 Expedited Processing fee    24 Hours from receipt

Hold at Front Desk for Pick-up by: \_\_\_\_\_  
(Service providers who run couriers for pick-up)  
**There is no notification service and there will not be a call for pick-up.**

Return via email (only one email): \_\_\_\_\_  
**No paper copy will be sent if email is provided.**

\_\_\_\_\_ Charge fees to prepaid account: Account Number \_\_\_\_\_  
and Account Name \_\_\_\_\_

\_\_\_\_\_  
Typed Name & Signature of Authorized Individual on Account

\_\_\_\_\_ Credit Card Type: \_\_\_\_\_ Visa "\_\_\_\_\_ "MC" \_\_\_\_\_ Discover "\_\_\_\_\_ "AmEx

Card Number: \_\_\_\_\_ Expiration Mo/Yr: \_\_\_\_\_ / \_\_\_\_\_ (MM/YY)

Card Holder Name: \_\_\_\_\_

Complete Billing Address: \_\_\_\_\_  
Street or PO

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_  
**MUST be Signature of Card Holder**