



Secretary of State
Business Programs Division

Special Filings, P.O. Box 942870, Sacramento, CA 94277-2870

Special Filings Records Order Form

To obtain information relating to a special filing of record with the California Secretary of State, complete both pages of this order form, attach a check made payable to the Secretary of State for the appropriate amount or an amount "not to exceed" a specified amount written below the amount payable line, and submit your request:

- By mail, along with a self-addressed envelope, to Secretary of State, Special Filings, P.O. Box 942870, Sacramento, CA 94277-2870.
In person (drop off), to the Secretary of State's Sacramento office at 1500 11th Street, 2nd Floor, Sacramento, CA 95814. A special handling fee of \$6.00 per entity is applicable for any information requested over the counter.

Note: Information requests are processed only in the Secretary of State's Sacramento office.

Requestor's Information

Your name:
Firm name, if any:
Address:
City / State / Zip:
Phone #: FAX #:

Entity or Individual's Name (Also include the file number, if known.)

Surety Bonds (Select the applicable type.)

- Auctioneer/Auction Company
Dance Studio
Employment Agency
Foreclosure Consultant
Health Studio
Invention Developer
Nurses' Registry
Seller of Travel Business Discount Programs
Credit Service Organization
Discount Buying Organization
Employment Counseling Service
Guaranteed Traffic Arrest Bail Bond
Immigration Consultant
Job Listing Service
Seller of Travel Discount Programs

Misc. Filings (Select the applicable type.)

- Athlete Agent Disclosure Statement
Athlete Agent Amendment to Disclosure Statement
Domestic Partnerships:
Declaration of Domestic Partnership
Notice of Termination of Domestic Partnership
Revocation of Termination of Domestic Partnership
Builder's Agent for Notice
Notice of a Joint Powers Agreement
Amendment of a Joint Powers Agreement
Registration of Claim as Successor-In-Interest
Registry of Public Agencies

Copy Requests

- **Plain (uncertified) Copies:** \$1.00 for the first page and \$0.50 for each additional page.
- **Certified Copies:** \$1.00 for the first page, \$0.50 for each additional page **and** \$5.00 certification fee per document.

If the number of pages is unknown when ordering copies, you may send either a check in the amount of \$20.00 per entity (refunds will be issued for amounts over \$10.00) or a blank check with a not to exceed amount written below the payment line (e.g., "Not to Exceed \$20.00"). A notice will be included with the order indicating the amount for which the check was completed. If the fees provided are insufficient, a fee letter indicating the total amount due will be sent to the requestor. The order will be completed upon receipt of the total fees.

Surety Bonds Only:

- | | | |
|--|---------------------------------------|---|
| <input type="checkbox"/> Copy of all Documents of Record (e.g., initial bond, riders, cancellations, etc.) | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |
| <input type="checkbox"/> Copy of Initial Bond | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |
| <input type="checkbox"/> Copy of all Amendment Documents | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |
| <input type="checkbox"/> Copy of _____
Enter the title of the document and, if known, the file date and/or document number. | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |

Domestic Partnerships Only:

- | | | |
|--|---------------------------------------|---|
| <input type="checkbox"/> Copy of all Domestic Partnership Documents of Record | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |
| <input type="checkbox"/> Copy of Declaration of Domestic Partnership | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |
| <input type="checkbox"/> Copy of Notice of Termination of Domestic Partnership | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |
| <input type="checkbox"/> Copy of Revocation of Termination of Domestic Partnership | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |

Misc. Filings Only:

- | | | |
|--|---------------------------------------|---|
| <input type="checkbox"/> Copy of all Documents of Record | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |
| <input type="checkbox"/> Copy of _____
Enter the title of the document and, if known, the file date and/or document number. | <input type="checkbox"/> Plain Copies | <input type="checkbox"/> Certified Copies |

Certificates – \$5.00 Each (excluding Domestic Partnerships)

- | | |
|---|---|
| <input type="checkbox"/> Certificate of Filing | <input type="checkbox"/> Certificate(s) |
| <input type="checkbox"/> Certificate of No Record | <input type="checkbox"/> Certificate(s) |

Special Handling Service – In Person Delivery Only

- Special Handling Fee (not applicable for orders submitted by mail) \$6.00 per entity

Online Searches

Online access to certain special filings information is available as described below:

- **Successor-In-Interest Search:** Allows you to view successor-in-interest claims filed with this office, containing the celebrity name, date of death, the name and address of the claimant and the interest claimed.
- **Immigration Consultant Surety Bond Search:** Allows you to view immigration consultant surety bond information filed with this office, containing the immigration consultant name, business name and address, bond status and term, photo, and bonding company name and address

Email and/or online requests for copies and/or certificates cannot be accepted at this time. Please complete both pages of this order form.

The space below is reserved for office use only.

Affix Cert. & Seal	_____	\$ _____
Making first page	_____	\$ _____
Making additional pages	_____	\$ _____
Certificate of	_____	\$ _____
Other	_____	\$ _____
Special Handling	_____	\$ _____
Total Amount Due		\$ _____
Total Amount Rec'd		\$ _____
Refund Amount		\$ _____
Balance Due		\$ _____