

## **INDIANA SECRETARY OF STATE SECURITIES DIVISION**

302 West Washington Street, Room E111 Indianapolis, IN 46204 Telephone: (317) 232-6681 www.in.gov/sos/securities

| NAME AND ADDRESS OF ISSUER                                   |       |                         |
|--|-------|-------------------------|
| Issuer's Name  |       |                         |
| Business Address (Number and Street)                         |       | P.O. Box, if applicable |
| City   | State | ZIP Code                |
| E-mail Address   |       | Telephone Number        |
| conduct an offering in reliance on the exemption.  Signature |       | Date (month, day, year) |
| Print Name   |       | Title                   |
| Please include the following documents with your sur-        |       |                         |

cause the investor funds to be deposited.

| FEE PAYMENT INFORMATION  |          | FOR OFFICE USE ONLY- VALIDATION |
|--|----------|---------------------------------|
| Issuer Notice Filing Fee   | \$100.00 |                                 |
|  |          |                                 |
| Make your check or money order in U.S. Currency payable to: INDIANA SECRETARY OF STATE |          |                                 |