



**APPLICATION FOR ADMISSION
A FOREIGN CORPORATION**

State Form 18572 (R2 / 10-06)

INDIANA DEPARTMENT OF FINANCIAL INSTITUTIONS

DATE OF ADMISSION (<i>month, day, year</i>)	
NAME OF THE DIRECTOR	

(SEAL)

DO NOT WRITE ABOVE THIS LINE - FOR OFFICE USE ONLY

Please attach the following to this application:

1. A copy of Articles of Incorporation or Association.
2. A copy of the most recent quarterly Report of Condition and Income filed with the applicable Federal Regulatory Agency; and
3. A check in the amount of ninety dollars (\$125.00), payable to the Secretary of State for their filing fee.

The undersigned makes application to the Indiana Department of Financial Institutions to obtain a certificate of admission to transact business as a Foreign Corporation in Indiana pursuant to I.C. 28-1-22-1 et seq.

APPLICANT INFORMATION

Name of corporation			
Post office address of the principal office of the corporation outside of the State of Indiana			
City	County	State	ZIP code
State or county where the corporation is incorporated		Date the corporation was established (<i>month, day, year</i>)	

NATURE OF BUSINESS

(Describe the nature of business that the foreign corporation intends to carry on in Indiana under its Articles of Incorporation or Association)

REGISTERED AGENT AND OFFICE INFORMATION

Name of the foreign corporation's registered agent and registered office for service of legal process			
Post office address of the foreign corporation's registered agent and registered office for service of legal process			
City	County	State	ZIP code

AUTHORIZED SIGNATORY

Signature of President or Vice President	Date signed (<i>month, day, year</i>)
Signature of Secretary or Cashier	Date signed (<i>month, day, year</i>)

STATE OF _____)
) SS:
COUNTY OF _____)

On _____, _____, _____ and
_____ personally appeared before me, a notary public, and after being
sworn, stated that they are the duly authorized officers of _____
Corporation and swear that the attached and foregoing statements are true and correct and further acknowledge the
execution of the foregoing instrument.

Witness my hand and Notarial Seal this _____ day of _____

Signature		(SEAL)
Name <i>(please print legibly)</i>		
Commission expiration date <i>(month, day, year)</i>	County	