FAXCORP®

INCORPORATION WORKSHEET FOR ORGANIZING A NEW JERSEY NONPROFIT CORPORATION

FAX: 215-977-9386 or 888-977-9386 (OUTSIDE 215 AREA CODE)
OR CALL: 215-563-8113 or 800-533-8113 (OUTSIDE 215 AREA CODE)

Attorney Name:	
Address:	ORDERS RECEIVED BEFORE 2:00 PM WILL BE
Phone Number:	SUBMITTED FOR FILING THE SAME DAY.
FAX # or Email:	FEE SCHEDULE
(We will FAX or Email the filed Certificate of Incorporation at no additional charge)	NJ State Expedited Filing Fee \$90.00 Basic Service Fee \$100.00* Name Availability Fee** \$20.00
Proposed Name of Corporation and Alternate Choices:	Corporate Outfit Approx. \$75.00
Name and Address of Registered Agent (P.O. Box Not Acceptable):	**State name check fee will be \$5 or \$10 higher if we have to use a 2 nd or 3 rd choice.
Statement of Purpose:	Please send my usual corporate outfit
Will the Corporation Make a 501(c)(3) Election with the I.R.S.? □ Ye	es □ No
Will the Corporation Have Members? □ Yes □ No	□ Please include membership certificates (add \$19.75)
Incorporator(s) Name(s) and Address(es): or M. BURR KEIM COMPANY to Provide □	
NAME(S) AND ADDRESS(ES) OF INIT	AL TRUSTEES - THREE OR MORE
1)	
2)	
3)	
4)	
*If you would like to have us prepare the bylaws and complete the organization r	minutes (additional \$35.00 fee) please complete this section.
OFFICERS	TRUSTEE: YES OR NO
President:	
Vice President	
Treasurer:	
Secretary:	
If you would like to have us obtain a Federal Employer Identification Number	er (FEIN) please complete this section (Our fee for this service is \$55.00)
Legal name of the responsible person: Social security number:	managing farmer IVI O in the most 40 managing O D Van D Na
Street address:	
City: State: Zip code:	
Phone #:	Does the entity expect to pay less than \$5,000 in total wage during the next calendar year? ☐ Yes ☐ No