



**Secretary of State  
Business Programs Division**

Business Entities

1500 11th Street, Sacramento, CA 95814

P.O. Box 944260, Sacramento, CA 94244-2600

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## **Business Entities Submission Cover Sheet**

For fastest service, file online at [bizfileOnline.sos.ca.gov](http://bizfileOnline.sos.ca.gov).

### **Instructions:**

- Complete and include this form with your paper submission. This form will not be made part of the filed document.
- Make all **checks or money orders** payable to the Secretary of State.
- In-person submissions (excluding Statements of Information): \$15 special handling fee. Do not include a \$15 special handling fee when submitting documents by mail.
- All submissions are reviewed in the date order of receipt, with online submissions given priority. For updated processing time information, visit [www.sos.ca.gov/business/be/processing-dates](http://www.sos.ca.gov/business/be/processing-dates).
- To obtain a certified copy, include certification fees with your submission.

**Note: All correspondence related to your submission will be sent to the name and address on your check or money order.**

### **Contact Person (Please type or print legibly):**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### **Entity Information (Please type or print legibly):**

Entity Name: \_\_\_\_\_

Entity Number (if applicable): \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



Secretary of State

SI-PT

Corporate Disclosure Statement
(Domestic Stock and Foreign Corporations)

Filing Fee - There is no fee for filing the Corporate Disclosure Statement.
Certification Fee (Optional) - \$5.00

This Space For Office Use Only

1. Corporate Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State.)

2. Secretary of State Entity Number

3. Jurisdiction (Enter the state, foreign country or other place where the corporation is formed.)

4. Independent Auditor

4a. Name of the Independent Auditor that prepared the most recent auditor's report.

4b. Description of other services, if any, performed by the Independent Auditor named in Item 4a.

4c. Name of the Independent Auditor employed by the corporation on the date of this statement, if different from Item 4a.

5. Required Statutory Disclosures

5a. Has an order for relief been entered in a bankruptcy case with respect to the corporation during the preceding 10 years? [ ] Yes [ ] No

5b. Has the corporation or any of its subsidiaries been a party to, or any of their property been subject to, any material pending legal proceedings, as specified by Item 103, Part 229 of SEC Regulation S-K? If yes, attach a description. [ ] Yes [ ] No

5c. Has the corporation been found legally liable in any material legal proceeding during the preceding five years? If yes, attach a description. [ ] Yes [ ] No

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**Corporate Disclosure Statement**  
**(Domestic Stock and Foreign Corporations)**  
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**6. Directors**

Names of Directors	Compensation	Shares	Options	Bankruptcy	Fraud
1) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
8) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
9) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
10) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
11) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
12) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
13) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
14) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
15) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
16) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**7. Executive Officers**

7a. Names of Executive Officers	Compensation	Shares	Options	Bankruptcy	Fraud
1) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5) _____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

7b. Chief Executive Officer (if not named in 7a)	Compensation	Shares	Options	Bankruptcy	Fraud
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

7c. Additional Executive Officers (if not named in 7a or 7b)	Bankruptcy	Fraud
1) _____	<input type="checkbox"/> Bankruptcy	<input type="checkbox"/> Fraud
2) _____	<input type="checkbox"/> Bankruptcy	<input type="checkbox"/> Fraud
3) _____	<input type="checkbox"/> Bankruptcy	<input type="checkbox"/> Fraud

**8. Loans to Members of the Board of Directors**

Names of Directors	Description of Loan including Amount and Terms
1) _____	_____
2) _____	_____

If additional space is needed, place the additional information on only one side of a standard letter-sized piece of paper (8 1/2 x 11) clearly marked as an attachment to the Corporate Disclosure Statement and attach the extra page(s) to the completed Corporate Disclosure Statement.

By submitting this Corporate Disclosure Statement to the Secretary of State, the corporation certifies the information contained herein, including any attachments, is true and correct.

\_\_\_\_\_  
 Type or Print Name of Person Completing the Form      Signature      Title      Date