AD-19 (2) State Form 49707

State Form 49707 (R4 / 8-19)

Indiana Department of Revenue Affidavit for Reinstatement of Foreign Corporation

State of))) SS				
) SS County of)				
	being duly s	worn accordin	g to law, affirms th	at he/she is the
(name)				
of	(corporation name)		a corpor	ation organized
under the laws of the State of				
	(incorporation	on date)		
State of Indiana,/ / with its princip (date authorized)	pal office located at	t address		
, city		, state _	, ZIP	
and identified by Federal Employer Identification Number	er		, and In	diana sales /
withholding tax account number (TID #)	, and that he/she makes this affidavit for			
and on behalf of this corporation. He/She states that the	e books and records	s of this corpo	ration are kept at	
	, in	care of		
That this corporation is engaged in the business of		primary purpose)		·
To the best of my belief and knowledge, all of the said c				
1933, has been included in Indiana income tax returns f				
been paid. The last Indiana income tax return was filed	(mor			or withholding
tax return(s) were filed on for period ending / (month) (year	, under			
That this affidavit is made for the sole purpose of inducin	ng the Indiana Dep	artment of Re	venue to issue a n	otice, as
provided under the applicable taxing acts, to the effect the	hat such corporatio	on has paid all	taxes due which w	/ill permit the
Indiana Secretary of State to reinstate the corporation to	o active status as a	uthorized to d	o business in the S	State of Indiana.
	-			
	3	Signature		
State of) SS County of)	Ŧ	ītle		
County of)				
Subscribed before me, a Notary Public in and for said co	ounty and state, thi	s day d	of	_,
			(month)	(year)
Commission Expiration Date	Signature			
County / State of Residence	Printed Name			·····

Mail to: Indiana Department of Revenue, Titles & Clearances Division, P.O. Box 6197, Indianapolis, IN 46206-6197.