

FRANCISCO V. AGUILAR
Nevada Secretary of State
Commercial Recordings Division
Compliance Division
Telephone: 775-684-5708



Respondent Information

Instructions:

- 1) Complete and print this form
- 2) Attach/Include necessary information (see section 3)
- 3) Once signed and completed, this form should be uploaded on the Forged Or Fraudulent Filing Complaints page on nvsos.gov.
- 4) If needed, you may submit via email, mail or fax:

Secretary of State
Commercial Recordings Division
Attn: Compliance Division
401 N. Carson Street
Carson City, NV 89701-4201

Phone: 775-684-5708
Email: blcompliance@sos.nv.gov
Fax: 775-684-7141

All information provided is deemed confidential and will not be available for public inspection except as otherwise required by law. The following information is in response to the alleged violation(s) of NRS 225.084:

SECTION 1: Respondent Information (required)

Case Number:

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss

Last Name

First Name

Middle Name

Street

City

State Zip

Preferred method of contact: ☐ Email ☐ Call ☐ Text

Phone Number:

Email:

SECTION 2: Information About a Forged or Fraudulent Filing, of Doing Business Without a License

Name of entity from which the Secretary of State is demanding response:
(name as registered with this office)

Entity, Business License, or UCC File Number:

Street

City

State

Zip

Phone Number:

Email:

Web address:

Indicate any and all relationships between the complainant and all persons involved in the alleged violation(s): (check all boxes that apply)

☐

Competitor

☐

Family/Relative

☐

Business Partner

☐

Partner/Spouse/Formal Spouse

☐

Friend/Acquaintance

☐

None

☐

Co-worker

☐

Other (please explain below)

SECTION 3: Additional Information

Please provide any additional information which the respondent believes may be helpful in the investigation of the alleged violation(s):*

*attach additional pages if needed

SECTION 4: Attachments

Attach photocopies of any additional information that may be useful in investigating this complaint or alleged violation(s). Please do not send originals as we cannot be responsible for their safekeeping.

Are you willing to testify in a court of Law or administrative proceeding regarding this complaint?

☐

YES

☐

NO

DECLARATION:

In filing this response, I declare under penalty of perjury under the Laws of Nevada that the information provided in this response is true and correct to the best of my knowledge and that the information may be used by the Secretary of State and other entities to further investigate the complaint or alleged violation(s) of NRS 225.084.

Printed Name of Respondent

X

Signature of Respondent

Date

IF THIS REPORT WAS PREPARED BY SOMEONE ON BEHALF OF THE RESPONDENT, PLEASE INDICATE WHO PREPARED THIS REPORT

Last Name

First Name

Middle Name

Name of Organization

Contact Phone Number:

Street

City

State

Zip

Relationship to Respondent

X

Signature of Person who Prepared Report

Date

Please make sure your response:

- is complete, printed and legible
- is signed by the Respondent
- includes all photocopied attachments