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Oklahoma corporation commission form 1004

Form Number 13-90
Revised 6-2008

OKLAHOMA TAX COMMISSION

STP TAXPAYER ASSISTANCE DIVISION
SPECIAL EVENTS
POST OFFICE BOX 269057
OKLAHOMA CITY, OK 73126-9057

SPECIAL EVENT PROMOTER/ORGANIZER BUSINESS APPLICATION

\$50.00
This fee must accompany
this application

Ownership:

- Individual/Sole Proprietor/Limited Liability Partnership/Limited Liability Company
General Partnership/Oklahoma Corporation/Other:
Limited Partnership/Foreign Corporation State

Applicant Information:

Legal Name/Federal Employer Identification Number
Mailing Address/Social Security Number
City/State/County/ZIP Code
Daytime Phone Number/Evening Phone Number/Fax Number/Contact Person

Business Identification:

Trade Name/DBA E-Mail Address
Physical Location Daytime Phone Number
City State County ZIP Code

Name(s) of Partner(s), Corporate Officer(s) and Member(s) Responsible for Reporting and Remitting Taxes: (must provide social security numbers)

Name of Partner/Corporate Officer/Member/Title/Social Security Number
Mailing Address
City/State/ZIP Code
Name of Partner/Corporate Officer/Member/Title/Social Security Number
Mailing Address
City/State/ZIP Code

OKLAHOMA CORPORATION COMMISSION
SPECIAL EVENT PROMOTER/ORGANIZER BUSINESS APPLICATION
Form 1004
June 2008
INTRODUCTION
1. This is a new form for use by Special Event Promoters/Organizers.
2. This form is for use by Special Event Promoters/Organizers only.
3. This form is for use by Special Event Promoters/Organizers only.
4. This form is for use by Special Event Promoters/Organizers only.
5. This form is for use by Special Event Promoters/Organizers only.
6. This form is for use by Special Event Promoters/Organizers only.
7. This form is for use by Special Event Promoters/Organizers only.

Change of Officer, Member or Partner Notification
1. Name of the corporation, partnership, limited liability company or other
2. Name of the officer, member or partner
3. Title of the officer, member or partner
4. Date of the change
5. Reason for the change

Change of Officer, Member or Partner Notification
1. Name of the corporation, partnership, limited liability company or other
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5. Reason for the change

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