

FORM **NFP 101.15** (rev. Dec. 2003)
STATEMENT OF CORRECTION
General Not For Profit Corporation Act

Secretary of State
Department of Business Services
501 S. Second St., Rm. 350
Springfield, IL 62756
217-785-2237
www.ilsos.gov

Remit payment in the form of a
check or money order payable
to Secretary of State.

_____ File # _____ **Filing Fee: \$25** Approved: _____
_____ **Submit in duplicate** _____ **Type or Print clearly in black ink** _____ **Do not write above this line** _____

1. Corporate Name: _____
2. State or Country of Incorporation: _____
3. Title of Document to be corrected: _____
4. Date erroneous document was filed by the Secretary of State: _____
5. Briefly identify the inaccuracy, error or defect to be corrected:

6. Corrected portion(s) of the document in like format:
For more space, attach additional sheets of this size.

7. The undersigned corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct. **All signatures must be in BLACK INK.**

Dated _____, _____
Month Day Year Exact Name of Corporation

Any Authorized Officer's Signature

Name and Title (type or print)