

Wyoming Secretary of State

State Capitol Building, Room 110 200 West 24th Street Cheyenne, WY 82002-0020 Ph. 307.777.7311 Fax 307.777.5339

Email: Business@wyo.gov

Wyoming Secretary of State's Office Annual Report Overpayment Refund Policy

Refunds specific to an overpayment due to a worksheet error or omission must be accompanied by:

- a. A copy of the incorrectly filed annual report clearly marked AMENDED;
- b. A corrected worksheet adjusting the fees to be paid to the Agency; and
- c. A completed Verified Claim Form (attached).

The above information must be provided in hard copy to the Wyoming Secretary of State's Office at 200 West 24th Street, Cheyenne, WY 82002-0020.

Upon receipt of the above information, the claim will be reviewed in order to determine if a refund is warranted. The refund will be issued to the business entity for which the amended annual report is being filed. The business entity will be mailed a State of Wyoming Warrant (a warrant is similar to a check) for the amount of the refund approximately 15 business days following agency processing.



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For Office Use Only

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Annual Report Overpayment Verified Claim Form

Date:			
Name & Address of Entity:			
The above entity is requesting a refund in the amount of \$	(dollar amount)	_ for the	Annual
	(donar amount)	Ģe	<i>)</i>
Report as evidenced by the attached documentation. The rea	ason for requesting	the refund is as	follows:
	Signature: _		
	T141-		
	1 itie:		
tate of			
County of			
The foregoing instrument was acknowledged before	me by		
	·		
, this da	y of	, 20	
Vitness my hand and official seal.			
	SEAL		
Notary Public			