



COUNTY OF CLINTON

Office of Clerk & Recorder
P.O. Box 308 • 850 Fairfax Street, Carlyle, IL 62231

Mary Rakers - Clerk & Recorder

[618] 594-2464 ext. 630
Fax [618] 594-0195

Dear Sir or Ma'am:

Enclosed is an assumed name certificate form. Please fill out this form, make a copy for yourself and for publication processes.

Return the original form with a fee of \$5.00 payable to the County Clerk office.

Take the copy of the completed form to a Clinton County newspaper for publication. This certificate must be published for three consecutive weeks. The cost of publication is yours to assume.

Also enclosed is a letter for the newspaper. Accompany your copy of the certificate with this letter for the newspaper.

If you have any questions, please don't hesitate to call.

Sincerely,

Mary Rakers
Clinton County Clerk

STATE OF ILLINOIS,

ss.

County of _____

This is to certify that the undersigned _____ conducting and transacting a _____

business in said County and State under the name of _____
at the following post office addresses:

that the true and real full names of all persons owning, conducting or transacting such business, with the respective post-office address of each, are as follows:

NAME

POST-OFFICE ADDRESS

NAME	POST-OFFICE ADDRESS
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Dated this _____ day of _____, A.D. _____

STATE OF ILLINOIS,

ss.

County of _____

I, _____, a Notary Public

in and for said County and State, do hereby certify that _____

personally known to me to be the same person _____ whose name _____ subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that he has read and signed said instrument and that the statements therein contained, and each thereof, are true.

Notary Public.

My commission expires on the _____ day
of _____, A. D. _____