Use BLACK Ink

REGISTRATION OF FIRM NAMES

STATE OF WISCONSIN, COUNTY OF _____

_____, being first duly sworn

deposes and says that he/she is _____
of the firm doing business under the name of:

_____

and located at: _____

_____and that such firm is a

(circle one) ***sole trader*** ***co-partnership*** ***association***

engaged in the business of _____

Recording area

Name and return address:

and that the only persons interested financially in such business or using such name are the following:

NAME	RELATIONSHIP TO THE BUSINESS	ADDRESS

Application is hereby made to register such firm name with the Register of Deeds for the purpose of complying with the requirement of section 134.17 of the Wisconsin Statutes.

_____ _____

Signature *Date* *Signature* *Date*

_____ _____

Print name *Print name*

This document was drafted by:
(print or type name below)

_____

*Names of persons signing in any capacity must be typed or printed below their signature.

STATE OF WISCONSIN, County of _____

Subscribed and sworn to before me on_____by the above named person(s).

Signature of notary or other person authorized to administer an oath (as per s. 706.06, 706.07)

_____

Print or type name: _____

Title _____ Date commission expires: _____.