

Use black ink

REGISTRATION OF FIRM NAMES

STATE OF WISCONSIN, COUNTY OF _____, being first duly sworn
 _____, 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 _____
 and that the only persons interested financially in such business or using such
 name are the following:

Recording area

Name and return address:

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

Signature

Print name

Print name

STATE OF WISCONSIN, County of _____

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

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: _____

*Names of persons signing in any capacity must be typed or printed below their signature.
WRDA 12/20/2001