

**ADAMS COUNTY ASSUMED NAME
CERTIFICATE OF OWNERSHIP OF A BUSINESS**

NAME OF BUSINESS: _____

ADDRESS OF BUSINESS: _____

CITY, STATE & ZIP: _____

NATURE OF BUSINESS: _____

The following is a true and full report of the names and addresses of all persons owning, conducting or transacting the business named above.

NAME OF PERSON(S)	HOME ADDRESS	CITY, STATE & ZIP	%

STATE OF ILLINOIS)
COUNTY OF ADAMS)

I, _____, being duly sworn upon oath, depose and say that the foregoing is a true and correct report of the real, full, name or names of the person or persons owning, conducting, or transacting the above-named business, with post office address or addresses.

(SIGNATURE)

Signed and sworn to (or affirmed) before me on this _____ day of _____, _____.

(SIGNATURE OF NOTARY PUBLIC)

For additional person(s), please complete next page to do notarize individually.

STATE OF ILLINOIS)
COUNTY OF ADAMS)

I, _____, being duly sworn upon oath, depose and say that the foregoing is a true and correct report of the real, full, name or names of the person or persons owning, conducting, or transacting the above-named business, with post office address or addresses.

(SIGNATURE)

Signed and sworn to (or affirmed) before me on this _____ day of _____, _____.

(SIGNATURE OF NOTARY PUBLIC)

(SEAL)

STATE OF ILLINOIS)
COUNTY OF ADAMS)

I, _____, being duly sworn upon oath, depose and say that the foregoing is a true and correct report of the real, full, name or names of the person or persons owning, conducting, or transacting the above-named business, with post office address or addresses.

(SIGNATURE)

Signed and sworn to (or affirmed) before me on this _____ day of _____, _____.

(SIGNATURE OF NOTARY PUBLIC)

(SEAL)

STATE OF ILLINOIS)
COUNTY OF ADAMS)

I, _____, being duly sworn upon oath, depose and say that the foregoing is a true and correct report of the real, full, name or names of the person or persons owning, conducting, or transacting the above-named business, with post office address or addresses.

(SIGNATURE)

Signed and sworn to (or affirmed) before me on this _____ day of _____, _____.

(SIGNATURE OF NOTARY PUBLIC)

(SEAL)