

TRADE NAME AFFIDAVIT

[DATE]

[NAME] of the County of [COUNTY], in the State of [STATE], being first duly sworn, upon oath deposes and say that [TRADE NAME] is the name under which a business or trade is being carried on at [ADDRESS] in the County of [COUNTY], and State of [STATE].

The full first names and surnames and addresses of all persons who are represented by the said trade name are as follows:

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Notary Seal