

Prepared By & Return To:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address City State Zip Phone #

### TRADE NAME

Verified statements of person or co-partnership conducting a business under a trade name or assumed name. (Chapter 547, Code of Iowa) STATE OF IOWA, WAPELLO COUNTY,

**Names of person(s) owning or having interest in the business:**

_____ Name	_____ Address	_____ City	_____ IA State	_____ Zip
_____ Name	_____ Address	_____ City	_____ IA State	_____ Zip
_____ Name	_____ Address	_____ City	_____ IA State	_____ Zip
_____ Name	_____ Address	_____ City	_____ IA State	_____ Zip

**\*CHECK ONE BOX PER FORM\***

I (we) in compliance with the provisions of Chapter 547, Code of Iowa, hereby establish or amend Trade Name as follows:

**Establish Trade Name:** \_\_\_\_\_  
Name of Business

\_\_\_\_\_  
Complete Business Address (Required)

**Dissolve Trade Name:** \_\_\_\_\_

Original Book: \_\_\_\_\_ Page: \_\_\_\_\_

**Add/Withdrawal name(s) of Partner(s):** \_\_\_\_\_

Name of Business: \_\_\_\_\_ Original Book: \_\_\_\_\_ Page: \_\_\_\_\_

**Change of Address:** \_\_\_\_\_

Business/Home (Circle One) Complete Business Address

Name of Business: \_\_\_\_\_ Original Book: \_\_\_\_\_ Page: \_\_\_\_\_

And that there is no one except those mentioned in the foregoing list that owns or has any interest in the above named business. I (we) further certify that a corrected statement will be filed in the future each time there may be any change in ownership, as provided by section 547.2, Code of Iowa.

\_\_\_\_\_  
Printed Name X Signature Date Signed: \_\_\_\_\_

\_\_\_\_\_  
Printed Name X Signature Date Signed: \_\_\_\_\_

\_\_\_\_\_  
Printed Name X Signature Date Signed: \_\_\_\_\_

\_\_\_\_\_  
Printed Name X Signature Date Signed: \_\_\_\_\_

Subscribed in my presence and sworn to before me by the said \_\_\_\_\_  
Name(s) as they appear on ID(s)

this \_\_\_\_\_ day of \_\_\_\_\_ X \_\_\_\_\_  
Notary Signature

Notary Public in and for **Wapello** County, **Iowa**.

