



**Robin M. O'Connor**  
**Lake County Clerk**  
 18 N. County Street, Rm. 101  
 Waukegan, IL 60085  
 (847) 377-2400

**ASSUMED BUSINESS NAME**  
**Application**  
**\$5.00 Filing Fee**

**Name of Business:** \_\_\_\_\_

**Nature/Purpose:** \_\_\_\_\_

*Describe the service or type of business*

**Address(es) where business is to be conducted or transacted in this county:**

\_\_\_\_\_  
*Legal street address required – No P.O. box* *City, State, Zip*

\_\_\_\_\_  
*Mailing address or P.O. box* *City, State, Zip*

\_\_\_\_\_  
*Telephone number and E-mail address*

**Name and residence or mailing address of the person(s) owning, conducting or transacting business:**

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City, State, Zip* *Phone*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City, State, Zip* *Phone*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City, State, Zip* *Phone*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City, State, Zip* *Phone*

STATE OF ILLINOIS)  
 COUNTY OF LAKE)

This is to certify the undersigned intend(s) to conduct the above named business and the true and legal full name(s) of person(s) owning, conducting or transacting the business is/are correct as shown.

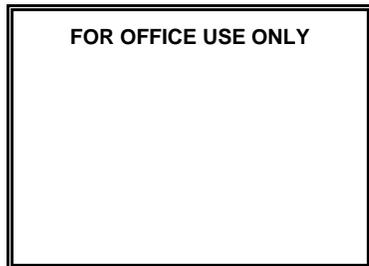
\_\_\_\_\_  
*Signature* *Date*

\_\_\_\_\_  
*Signature* *Date*

\_\_\_\_\_  
*Signature* *Date*

\_\_\_\_\_  
*Signature* *Date*

**The foregoing instrument was acknowledged before me by**



\_\_\_\_\_  
*Printed name(s) of person(s) who appeared and signed before Notary Public*

\_\_\_\_\_  
*Printed name(s) of person(s) who appeared and signed before Notary Public*

**on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.**

\_\_\_\_\_  
*Signature of Notary Public* *Place notary seal below*