

ASSUMED NAME CERTIFICATE INFORMATION

Filing Information for Unincorporated Business or Profession:

1. Assumed Name (DBA) Certificates are filed with the County Clerk in the county/counties where the business is located and/or will conduct business.
2. The certificates are valid for a period of ten (10) years from the date filed in the County Clerk's Office.
3. Certificate must be signed before a notary public prior to filing within County Clerk's Office.
4. The filing fee is \$26.00 for the first page and \$4.00 for each additional page.

Filing Information for Incorporated Business or Profession:

1. Assumed Name (DBA) Certificates are filed with the Secretary of State in Austin. Please visit the Secretary of State's website for more information www.sos.state.tx.us
2. Assumed Name (DBA) Certificates may also be filed with the county/counties where the business is located and/or will conduct business.
3. Certificate must be signed before a notary public prior to filing within County Clerk's Office.
4. The filing fee is \$26.00 for the first page and \$4.00 for each additional page.

State Tax Sales ID#:

1. Contact the Texas State Comptrollers of Public Account Office at www.comptroller.texas.gov

ASSUMED NAME RECORD (D.B.A.)
CERTIFICATE OF OWNERSHIP FOR UNINCORPORATED BUSINESS OR PROFESSION
Pursuant to Chapter 71, Sect. 151 of the Texas Business & Commerce Code, Certificates of Ownership are valid for a period not to exceed 10 years from the date filed in the County Clerk's Office.

NAME UNDER WHICH BUSINESS IS TO BE CONDUCTED:

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

BUSINESS CONDUCTED AS:

- Proprietorship Sole Practitioner (Dr./Lawyer/etc.) General Partnership
 Joint Venture Limited Partnership Non-Profit Other

CERTIFICATE OF OWNERSHIP

I/WE the undersigned, am/are the owner(s) of the above business and my/our name(s) and address(es) given is/are true and correct and there is/are no ownership(s) in said business other than those listed herein below.

NAME(S) OF OWNERS

PRINTED NAME: _____ SIGNATURE: _____

ADDRESS: _____

PRINTED NAME: _____ SIGNATURE: _____

ADDRESS: _____

PRINTED NAME: _____ SIGNATURE: _____

ADDRESS: _____

THE STATE OF TEXAS
COUNTY OF DE WITT

BEFORE ME THE UNDERSIGNED AUTHORITY, on this day personally appeared

known to me to be the person(s) whose name(s) is/are subscribed to the foregoing certificate and acknowledged to me that he is/are the owner(s) of the above named business and that he executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS _____ DAY OF _____, 20_____.

SIGNATURE OF NOTARY PUBLIC

County Clerk certification and recording information