

STATE OF MAINE
Town of Bucksport

Certificate of Sole Proprietor Adopting Name Other Than His Own
(Title 31, M.R.S.A., Sec. 2)

The undersigned hereby certifies that he/she intends to engage in the _____
_____ business as sole proprietor thereof, and to adopt the name
and designation in conduct of said business.

Owner Name: _____

Residence Address: _____

Mailing Address: _____

Business Phone: _____ Home Phone: _____

Cell Phone: _____ Email: _____

Address of Business: _____

Signature: _____ Date: _____

STATE OF MAINE

County of Hancock

Date: _____

Then personally appeared _____

and made oath to the foregoing certificate, that the same is true.

Town Clerk/Notary Public

TOWN OF BUCKSPORT – OFFICE OF THE TOWN CLERK

Adopted Name: _____

Received: _____ Time: _____ and recorded

in Book _____ Page _____

Attest: _____