



County Clerk
Elections

Aimee X. Espinoza
AUDITOR-CONTROLLER-COUNTY CLERK



The initial and renewal Filing fee is \$43 for 1 DBA & 1 Owner, \$6 for each additional DBAs & Registrants.

Complete all Items 1-6 and if mailing please provide the fee via check, money order or cashier's check, a self-addressed stamped envelope, and a notarized Affidavit of Identity.

FICTITIOUS BUSINESS NAME STATEMENT

Doing Business As (DBA): If listing <u>more than three</u> DBAs, attach the Addendum document.								File Number	
1	DBA # 1:								
	DBA # 2:								
	DBA # 3:								
2	Principal place of business street address:				Mailing Address (do not enter "SAME"):				
	City	State:	Zip Code:	County:	City:	State:	Zip Code:		
Registrant(s): Individual or partners: list your full legal name separately, as indicated. Spouses; list separately. Corps, LLC, or LP: list name and state of corporation or organization. (Attach FBN Addendum as needed).									
3	A	Full name of individual, partner, or name of Corporation, LLC, or LP:						State of incorp. or org.:	
		Registrant's Address:		City:		State:	Zip Code:		
	B	Full name of individual, partner, or name of Corporation, LLC, or LP:						State of incorp. or org.:	
		Registrant's Address:		City:		State:	Zip Code:		
	C	Full name of individual, partner, or name of Corporation, LLC, or LP:						State of incorp. or org.:	
		Registrant's Address:		City:		State:	Zip Code:		
4	(Select One Only) The business is conducted by: <div><input type="radio"/> Individual <input type="radio"/> Unincorporated Association <input type="radio"/> Married Couple <input type="radio"/> General Partnership <input type="radio"/> Corporation* <input type="radio"/> Joint Venture <input type="radio"/> Limited Partnership <input type="radio"/> Trust <input type="radio"/> Domestic Partners <input type="radio"/> Co-Partners <input type="radio"/> Limited Liability Company* <input type="radio"/> Limited Liability Partnership*</div>								
5	Insert the date the business commenced (MM/DD/YYYY). If the business has not started, enter N/A. Date: ____ / ____ / ____								
REVIEW BUSINESS AND PROFESSIONS CODES: SUBDIVISION (A) OF SECTION 17920, SUBDIVISION (B) OF SECTION 17920, SECTION 17913, & SECTION 14411 ET SEQ., AND GOVERNMENT CODE SECTION 6250-6277									
BY SIGNING BELOW, I DECLARE THAT ALL INFORMATION IN THIS STATEMENT IS TRUE AND CORRECT									
6	Signature _____				Printed Name _____				
	Title of person signing if Corporation, or LLC. _____				Phone # _____				
<input type="checkbox"/> Check box to block from public									
*****COUNTY CLERK USE ONLY: DO NOT WRITE OR TYPE BELOW THIS LINE*****									
Date Statement Filed: ____ / ____ / ____		Date Statement Expires: ____ / ____ / ____		Aimee X. Espinoza, Auditor-Controller-County Clerk By: _____ /					
PUBLIC NOTICE									
<input type="checkbox"/>	Initial/Renewal with changes: must be published once a week for four consecutive weeks, initial publication must be within 45 days of the filed date, and an affidavit of publication must be filed with the County Clerk within 30 days after publication was completed.								
<input type="checkbox"/>	Renewal: publication is not required, pursuant to B&P Code Section 17917(c)								
BANK CERTIFICATION									
I hereby certify that the foregoing is a correct copy of the original filed in my office on ____ / ____ / ____.									
Aimee X. Espinoza, Auditor-Controller-County Clerk, By:									
COUNTY CLERK		BANK COPY		NEWSPAPER		REGISTRANT		DBA #1:	