



Hamilton County

## ASSUMED BUSINESS NAME FILING INSTRUCTIONS

### Hamilton County Clerk

100 South Jackson Street, Rm 2

McLeansboro, IL 62859

(618) 643-2721

[coclerk@hamiltoncountyil.gov](mailto:coclerk@hamiltoncountyil.gov)

### Necessity of Certificate

The following is an excerpt from Chapter 805 of the Illinois Compiled Statutes 405/1:

*No person or persons shall conduct or transact business in this State under an assumed name, or under any designation, name or style, corporate or otherwise, other than the real name or names of the individual or individuals conducting or transacting such business, unless such person or persons shall file in the office of the County Clerk of the County in which such person or persons conduct or transact or intend to conduct or transact such business, a certificate setting forth the name under which the business is, or is to be, conducted or transacted, and the true or real full name or names of the person or persons owning, conducting or transacting the same, with the post office address or addresses of such person or persons and every address where such business is, or is to be, conducted or transacted in the county. The certificate shall be executed and duly acknowledged by the person or persons so conducting or intending to conduct the business.*

**Corporations, limited partnerships and assumed corporate names (Form BCA-4.15/4.20) file with the Secretary of State at [ilsos.gov](http://ilsos.gov). You should seek legal advice to determine what filings are necessary in such cases.**

### Filing Procedures

1. The applicant or their attorney representative needs to complete two (2) copies of the Assumed Business Name Certificate Intention. Owners must sign both copies in the presence of a Notary Public.
2. Submit both copies of the Assumed Business Name Certificate Intention along with the \$32.00 filing fee. Documents can be delivered in person or via mail to the County Clerk's office. One date stamped copy will be returned to its owner as the filing receipt.
3. The filing receipt will need to be taken to the McLeansboro Gazette to publish as a legal notice once a week for three (3) consecutive weeks. The first publication must appear in the newspaper within fifteen (15) days after the initial filing date in the Hamilton County Clerk's office. The newspaper will typeset the legal notice from the date-stamped copy of the certificate.
4. To complete the filing process, within fifty (50) days of the date the owner(s) filed the Assumed Business Name Certificate Intention (steps 1-3) above, the Hamilton County Clerk's office must receive an original certificate of publication from the McLeansboro Gazette. The certificate of publication must accurately reflect the information that appears on the Assumed Business Name Certificate Intention.

***Please note that it is the responsibility of the business owner(s) to make sure the Hamilton County Clerk's office has received the original certificate of publication. If the original certificate of publication is not received within fifty (50) days of the original filing, the Assumed Business Name Certificate Intention is void.***

5. When steps (1-4) are complete, the Assumed Business Name Certificate is assigned a number and entered into the Hamilton County Assumed Business Name register. The business owner(s) will be issued a copy of their Assumed Business Name Certificate Intention and a Certificate of Ownership of Business

State of Illinois }  
County of Hamilton } ss.

**ASSUMED BUSINESS NAME CERTIFICATE INTENTION**

This is to certify that the undersigned intend/intends to conduct and transact a

\_\_\_\_\_ business

in said County and State under the name of \_\_\_\_\_  
at the following address:

ADDRESS  
\_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
BUSINESS PHONE ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_ E-MAIL \_\_\_\_\_

that the true and real full names of all persons owning, conducting, or transacting such business, with the respective post office address of each, are as follows:

<u>NAME</u>	<u>POST OFFICE ADDRESS</u>
_____	_____
_____	_____
_____	_____
_____	_____

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

State of \_\_\_\_\_ }  
County of \_\_\_\_\_ } ss.

I, \_\_\_\_\_, a Notary Public in and for said County and State, do hereby certify that \_\_\_\_\_ personally known to me to be the same person(s) whose name(s) is (are) subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that s/he (they) has (have) read and signed said instrument and that the statements therein contained, and each thereof, are true.

**CLERK'S FILE STAMP:**



\_\_\_\_\_  
(Seal) Notary Public