

NOTIFICATION OF WITHDRAWAL OF PARTNER

STATE OF ILLINOIS)
COUNTY OF COOK)

For office use only
Certificate # _____

Submit completed form and a check for \$1.50 payable to:
Cook County Clerk David Orr
Bureau of Vital Statistics
Attn: Assumed Name Registration Unit
P.O. Box 642570
Chicago, IL 60602-2570

Let it be known that the Business _____
_____ (full name of business)

has had a partner(s) withdraw as of _____
_____ (enter date of withdrawal)

Location of Business:

(street address, city, zip)

The undersigned (print names of withdrawing partners, using reverse for additional names)

is/are the proprietor(s) of the Business.

Dated this _____ day of _____

Signature _____
Signature _____
Signature _____

I, _____,
a Notary Public in Cook County, IL, do hereby certify that [record owner(s) name(s) below]

is/are personally known to me to be the same person(s) whose name(s) subscribed to the
foregoing instrument appeared before me this day in person and acknowledged that he/she read
and signed the instrument and that the statements therein contained, and each thereof, are true.

Notary Public _____
(signature)

My commission expires on the _____ day of _____