



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

~~THOMAS DEAN INGRAM~~ T&C TRANSPORT

The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>THOMAS DEAN INGRAM</u>	<u>P.O. Box 545 Cottonwood, Idaho 83522</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> <u>OTHER TRUCKING</u> | | |

4. The name and address to which future correspondence should be addressed: Phone number (optional): (208) 962-5670

TOM INGRAM dBA T&C TRANSPORT
P.O. Box 545, Cottonwood, Idaho 83522

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: TOM D INGRAM

Printed Name: TOM D INGRAM

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 1/98

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IDAHO SECRETARY OF STATE
11/27/2002 05:00
CK: 1293 CT: 150010 BH: 648525
1 @ 20.00 = 20.00 ASSUM NAME # 2

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