



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**FILED/EFFECTIVE**

2002 MAY 30 AM 8:45

**Please type or print legibly.**  
**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

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

Thompson & Associates of Idaho

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Kenneth D. Thompson & Eloisa Thompson

Complete Address

12 Riverside Dr. P.O. Box 192

Salmon, Idaho 83467

3. The general type of business transacted under the assumed business name is:

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

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

4. The name and address to which future correspondence should be addressed:

Kenneth D. Thompson

P.O. Box 192

Salmon, Idaho 83467

Phone number (optional):

(208) 756-8910

Secretary of State use only

Signature: Kenneth D. Thompson  
(signature required)

Printed Name: Kenneth D. Thompson

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 01/2001

105/30/2002 CK: 3026 CT: 158818 BH: 468631  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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