
NAME Indersigned ness Name. SIATE OF 10AHO Signed use(s) in the transaction of ELIVERY f the entity or individual(s) doing Complete Address 1887 E DOBERMAN DR
f the entity or individual(s) doing Complete Address
MERIDIAN, ID 33342
the assumed business name is: Ind Public Utilities Submit Certificate of Assumed Business
Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Phone number (optional)
Secretary of State use only
DS0460