

# FICTITIOUS NAME FORM

Enter your information into the form below; the text within the box will publish exactly as shown/provided.

## FICTITIOUS NAME NOTICE

\_\_\_\_\_  
\_\_\_\_\_  
Name(s) and Home Address(es)

\_\_\_\_\_ intends to file  
\_\_\_\_\_ did file \_\_\_\_\_ in the Office of the Secretary of the Commonwealth  
of Pennsylvania, on or about \_\_\_\_\_, registration of the name  
Date

\_\_\_\_\_ under which \_\_\_\_\_ intend(s) to do business at \_\_\_\_\_  
He, She, They Business Address

\_\_\_\_\_ pursuant to the provisions of the Act of Assembly of December 16, 1982,  
Chapter 3, known as the "Fictitious Name Act".

Date(s) requested to publish. (optional)

\_\_\_\_\_

This will publish in LNP unless the Ephrata Review or the Lititz Record Express is requested in the line above.

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## Billing Information\*

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Email Address

\*Quotes are provided after this form is submitted.  
Prepayment is required for private parties and new business accounts prior to publication.