**CHEROKEE TRIBUNE**

**(Please include a copy of your Trade Name that you filed with the court)**

**TRADE NAME**

A copy of your Trade Name Application from the Clerk’s office is needed in addition to your payment of $40.00 in order to publish a Trade Name. The Trade Name publishes two (2) times (2 Thursdays). The deadline is Monday at 5:00 PM to start running that Thursday. We take check, cash and credit card. A publisher’s affidavit is an additional $25.00. Please make sure the information you provide is clearly printed on this form. We must have a contact name and daytime phone number also.

APPLICATION TO REGISTER A

BUSINESS TO BE CONDUCTED

UNDER A TRADE NAME

STATE OF GEORGIA

COUNTY OF CHEROKEE

The undersigned hereby certifies that (he/she is) (they are) conducting a business at (street address) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, County of Cherokee, in the State of Georgia under the trade name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_ and that the nature of said business is:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and that said business is composed of the following (person, corporation): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please select one: ❒ $40 charge for publication cost only

OR

❒ $65 charge for publication plus publisher’s affidavit

Mail publisher’s affidavit / Email affidavit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please complete each blank and forward completed form to:

[triblegals@mdjonline.com](mailto:triblegals@mdjonline.com) or mail to 521 East Main Street, Canton, Georgia 30114

Any questions please call legal advertising at 770-428-9411 ext 4402.

CREDIT CARD INFO: Please note when your card is charged it will say Marietta-Rome News

Name as it appears on credit card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_

Charge Amount: $ \_\_\_\_\_\_\_ Credit Card #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exp Date: \_\_\_\_\_\_ V-Code: \_\_\_\_\_\_\_ (AX: 4 digits above the cc# / MC/VISA/DISC: last 3 digits on the back of the card on signature line)