



Voter Registration
Financial Records

Shawndra Jaggart

Jefferson County Clerk
P. O. Box 6317
Pine Bluff, AR 71611
(870) 541-5322
(870) 541-5324 Fax



Marriage License
Probate

DOING BUSINESS UNDER AN ASSUMED NAME CERTIFICATES

Arkansas law requires that no person shall conduct or transact business in this state under an assumed name or under any designated name or style, corporate or otherwise, other than the real name of the individual conducting or transacting such business unless the person files a certificate in the office of the County Clerk of the counties in which the person conducts or transacts or intends to conduct the business.

DBA Certificates are filed and recorded in the office of the County Clerk. A person or persons desiring to file a DBA is required to complete the certificate form and sign it before a notary public.

- The filing fee for this certification is \$25.00
- The index fee is \$1.00
- The certified copy the bank requires is an additional \$5.00
- If the County Clerk office has to notarize the form, there is an additional \$5.00 charge

The types of businesses that would typically use the form are sole proprietorships and general partnerships

Filing the DBA Certificate in the County Clerk's Office may be accomplished by:

1. In person
2. Mail (Provide a self-addressed stamped envelope with a money order or cashier's check in the amount of \$31.00; \$25.00 filing fee, \$1.00 index fee and \$5.00 for a certified copy.)

INSTRUCTIONS:

You can either print this form off from the website and fill it out by hand or fill it out on your computer and then print it out. After filing the form out either return it to the Jefferson County Clerk's Office in person or mail it in as described above.

For further information regarding doing business in the State of Arkansas, you can visit the Secretary of State's website at www.sos.arkansas.gov.

Shawndra Jaggart

Jefferson County and Probate Clerk

DOING BUSINESS UNDER ASSUMED NAME

CERTIFICATE No. _____

I (We) do hereby certify that I am (we are), or intend to, conduct or transact a business under the assumed or designated name of _____

at the location address of _____

and I (we) further certify that the true full name or names of each person conducting or transacting said business is (are) as follows:

NAME	MAILING ADDRESS
_____	_____
_____	_____
_____	_____

This Certificate is being executed in compliance with the provisions of Arkansas Code Annotated 4-70-203.

Signed: _____

ACKNOWLEDGMENT

STATE OF ARKANSAS)

COUNTY OF _____)

On this day, before me the undersigned, _____ Notary Public duly commissioned and acting within and for the County and State aforesaid, personally appeared _____ to me personally known to be the identical person(s) whose name(s) is (are) affixed hereto, and who executed the above Certificate, and acknowledged that he (she) (they) executed the same for the uses and purposes therein contained and set forth.

Given under my hand and seal on this _____ day of _____.

Notary Public

(Seal)

Commission expires

FILED FOR RECORD on the date and time noted herein

BUSINESS NAMES Book _____ Page _____

Shawndra Taggart

COUNTY CLERK

(SEAL)

BY _____ Deputy Clerk