

State of Maine  
TOWN OF HARPSWELL

CERTIFICATE OF ASSOCIATION FOR PURPOSE OF ENGAGING IN MERCANTILE ENTERPRISE  
(Title 31 M. R. S. A. Section 1)

The undersigned hereby certify that they have become associated as partners or otherwise  
for the purpose of engaging in the \_\_\_\_\_  
(type of business)

business, under the partnership name (or d/b/a) with the name, style or designation of  
\_\_\_\_\_ in the conduct of said business.  
(name of business)

Business Location Address \_\_\_\_\_ Zip Code \_\_\_\_\_

www. \_\_\_\_\_  
Business Website \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_  
Printed Name of PARTNER      Residence Address      Signature (signature must be  
witnessed by Notary/Attorney)

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

\_\_\_\_\_  
Printed Name of PARTNER      Residence Address      Signature (signature must be  
witnessed by Notary/Attorney)

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

**BELOW INFORMATION MUST BE COMPLETED BY A NOTARY PUBLIC OR ATTORNEY**  
STATE OF MAINE

Cumberland County, SS. \_\_\_\_\_ A.D. 20\_\_

Then \_\_\_\_\_, personally appeared and  
severally made oath to the foregoing certificate, that the same is true.

Before me,

\_\_\_\_\_  
Attorney or  
Notary Public (Commission Expires \_\_\_\_\_)

**Note: This certificate shall be deposited in the Town of Harpswell Office of the Town Clerk in  
which the business is to be carried on. The Clerk is entitled to a fee of Ten dollars (\$10.00)  
for recording this certificate.**