

CITY OF SPRINGFIELD
Commonwealth of Massachusetts

**Statement of Discontinuance, Change of Residence, Change of Location of
Business, Withdrawal, Joined, or Deceased from Business or Partnership.**

In Conformity With the Provisions of Chapter 110, Section 5 of the General Law, as Amended, the
Undersigned hereby declare(s) that _____

(has) (have) this day Discontinued, (Retired From) (Withdrawn From) (Joined) the Business of:

Conducted at _____ (Street)

In the City of Springfield as set forth in Certificate filed in the Office of the City Clerk of said City
of Springfield.

FULL NAME

RESIDENCE

_____	_____
_____	_____
_____	_____
_____	_____

Signature(s):

_____	_____
_____	_____

I hereby state that the location of (the business) (my residence) as it appears of the Business Certificate of

_____ filed on ____/____/____ has been changed to _____

Signature(s) _____

By (Executive for Estate of) (Administrator under the will of)

_____, SS.

ON ____/____/20__ THE ABOVE NAMED PERSON(S) PERSONALLY APPEARED BEFORE ME AND MADE OATH
THAT THE FOREGOING STATEMENT IS (ARE) TRUE TO THE BEST OF HIS (HER) (THEIR) KNOWLEDGE AND
BELIEF.

NOTARY PUBLIC SIGNATURE

SEAL

PRINT NAME
MY COMMISSION EXPIRES: