Phone: (503) 986-2200
Fax: (503) 378-4381

Secretary of State
Corporation Division
255 Capitol St. NE, Suite 151
Salem, OR 97310-1327

Assumed Business Name—New Registration

For office use only

FILED
DEC 28 2000
OREGON
SECRETARY OF STATE

Registry Number: 786279-82

Attach Additional Sheet if Necessary
Please Type or Print Legibly in Black Ink

1) **Assumed Business Name** ABC House

2) **SIC Code** (See back of form.) 8390

☐ CHECK HERE TO INDICATE ON YOUR REGISTRATION THAT YOU DO NOT WANT MAIL SOLICITATION. PLEASE NOTE, THERE IS NO OBLIGATION ON THE PART OF PERSONS USING OUR LISTS TO REFRAIN FROM MAILING SOLICITATIONS. THIS MARK IS SIMPLY INFORMATIONAL. ORS 56.022

3) **Principal Place of Business** (Street address, city, state, zip)
118 SE 2nd, Suite D
Albany, OR 97321

4) **Authorized Representative** (One name only)
James H. Jordan

5) **Mailing Address for Authorized Rep** (Address, city, state, zip)
PO Box 983
Albany, OR 97321-0369

6) **Registrants** (List names and street addresses of registrants. Attach a separate sheet if necessary.)

Name	Street Address	City/State/Zip	
Linn County Child Victim Assessment Center, Inc.	118 SE 2nd, Suite D	Albany, OR 97321	~~#483676-88~~ 438676-88

7) **Counties**

☐ All Counties (Statewide)

☐ Baker	☐ Crook	☐ Harney	☐ Lake	☐ Morrow	☐ Union
☒ Benton	☐ Curry	☐ Hood River	☐ Lane	☐ Multnomah	☐ Wallowa
☐ Clackamas	☐ Deschutes	☐ Jackson	■ Lincoln	☐ Polk	☐ Wasco
☐ Clatsop	☐ Douglas	☐ Jefferson	☒ Linn	☐ Sherman	☐ Washington
☐ Columbia	☐ Gilliam	☐ Josephine	☐ Malheur	☐ Tillamook	☐ Wheeler
☐ Coos	☐ Grant	☐ Klamath	☐ Marion	☐ Umatilla	☐ Yamhill

8) **Execution** (All registrants must sign.)
Linn County Child Victim Assessment Center, Inc.
by: [signature]
President

FEES

Required Filing Fee	$ 10
$2 for each county	$ 4
Confirmation copy (optional)	$ 5
TOTAL (nonrefundable)	$ 19

Please make check payable to "Corporation Division."

NOTE: Filing fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.

9) **Contact Name** James H. Jordan

Daytime Phone Number - Including Area Code 541-917-0100

CR101 (Rev. 12/99)

121100 01519 pd 19.00 12.28