## **Going out of Business Sale**

Owner of the Merchandise:
Business Name
First, Middle, Last Name
Address
City, State, Zip Code
Phone Number
Person conducting the sale:
First, Middle, Last Name
Address
City, State, Zip Code
Phone Number
Email
What are you calling this sale?
Name
What is the physical location (address) of the going out of business sale?
Address
City, State, Zip Code
What is the date the sale will begin?
Date

The person, including any natural person, corporation, trust, partnership, incorporated or unincorporated association, and any other legal entity, who has an ownership interest in the business or in the merchandise to be sold **is not** subject to a court order resulting from a civil enforcement action under ORS 646.608.