

**~COMBINED DECLARATION OF USE IN COMMERCE/APPLICATION FOR  
RENEWAL OF REGISTRATION OF MARK UNDER §§ 8 & 9 (15 U.S.C. §§ 1058 & 1059)~**

**WHEN TO FILE:** You must file a Section 8 declaration, specimen, and fee on a date that falls on or between the ninth (9<sup>th</sup>) and tenth (10<sup>th</sup>) anniversaries of the registration, and each successive ten-year period thereafter (or, for an extra fee of \$100.00 per class, you may file within the six-month grace period). Also, you must file a renewal application within the same period (or, for an extra fee of \$100.00 per class, you may file within the six-month grace period following the registration expiration date). **FAILURE TO FILE THIS DOCUMENT WILL RESULT IN CANCELLATION/EXPIRATION OF THE REGISTRATION.** **Note:** Because the time for filing a ten-year Section 8 declaration coincides with the time for filing a Section 9 renewal application, you may use this combined §§8 & 9 form. For more information, please see *Basic Facts About Maintaining a Trademark Registration* (for a copy, call the Trademark Assistance Center, at 1-800-786-9199).

**BASIC INSTRUCTIONS**

The following form is written in a “scannable” format that will enable the U.S. Patent and Trademark Office (USPTO) to scan paper filings and capture application data automatically using optical character recognition (OCR) technology. Information is to be entered next to identifying data tags, such as <MARK>. OCR software can be programmed to identify these tags, capture the corresponding data, and transmit this data to the appropriate data fields in the Trademark databases, largely bypassing manual data entry processes.

Please enter the requested information in the blank space that appears to the right of each tagged (< >) element. However, do not enter any information immediately after the section headers (the bolded wording appearing in all capital letters). Some of the information requested *must* be provided. Other information is either required only in certain circumstances, or provided only at your discretion. **Please consult the “Help” section following the form for detailed explanations as to what information should be entered in each blank space.**

To increase the effectiveness of the USPTO scanners, it is recommended that you use a typewriter to complete the form.

**MAILING INFORMATION**

Send the completed form; appropriate fee (the filing fee for the Combined §§8 & 9 Declaration/Application is \$500.00, \$100.00 per class for the Section 8 Declaration and \$400.00 per class for the renewal application, made payable to the “Commissioner of Patents and Trademarks”); and any other required materials to:

Commissioner for Trademarks  
P.O. Box 1451  
Alexandria, VA 22313-1451

You may also wish to include a self-addressed stamped postcard with your submission, on which you identify the mark and registration number, and list each item being submitted (e.g., declaration, fee, specimen, etc.). We will return this postcard to confirm receipt of your submission.

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~To the Commissioner for Trademarks~

**<TRADEMARK/SERVICE MARK INFORMATION>**

<Mark>

<Registration Number>

<Registration Date>

**<OWNER INFORMATION>**

<Name>

<Street>

<City>

<State>

<Country>

<Zip/Postal Code>

**<DOMESTIC REPRESENTATIVE>**~Required ONLY if the owner's address is outside the United States.~

<Name> ~is hereby appointed the owner's  
representative upon whom notice or process in the proceedings affecting the mark may be served.~

<Street>

<City>

<State>

<Zip Code>

**<GOODS AND/OR SERVICES INFORMATION>**

<All Goods and/or Services in Existing Registration>~The owner is using mark in commerce on or in connection with all goods and/or services listed in the existing registration. If not, list in the next section the goods and/or services to be deleted.~

<Goods and/or Services Not in Use to be Deleted>~In the following space, list only those goods and/or services (or entire class(es)) appearing in the registration for which the owner is **no longer** using the mark in commerce. **LEAVE THIS SPACE BLANK IF THE OWNER IS USING THE MARK ON OR IN CONNECTION WITH ALL GOODS AND/OR SERVICES LISTED IN THE REGISTRATION.**~

**<FEE INFORMATION>**

~Combined §§8 & 9 Filing Fee~

\$500.00 x <Number of Classes> = <Filing Fee Due>

~Grace Period Fee: If filing during the six-month grace period, enter Combined §§8 & 9 Grace Period Fee.~

\$200.00 x <Number of Classes> = <Grace Fee Due>

~Filing Fee Due + Grace Period Fee Due~ = <Total Fees Paid>

## <SPECIMEN AND SIGNATURE INFORMATION>

### ~Section 8: Declaration of Use in Commerce

The owner is using the mark in commerce on or in connection with the goods/services identified above, as evidenced by the attached specimen(s) showing the mark as currently used in commerce.

**(You MUST ATTACH A SPECIMEN showing the mark as currently used in commerce for at least one product or service in each international class covered.)**

The undersigned being hereby warned that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001, and that such willful false statements and the like may jeopardize the validity of this document, declares that he/she is properly authorized to execute this document on behalf of the Owner; and all statements made of his/her own knowledge are true and that all statements made on information and belief are believed to be true.

### Section 9: Application for Renewal

*The registrant requests that the registration be renewed for the goods and/or services identified above.~*

~Signature~ \_\_\_\_\_

<Date Signed>

<Name>

<Title>

## <CONTACT INFORMATION>

<Name>

<Company/Firm Name>

<Street>

<City>

<State>

<Country>

<Zip/Postal Code>

<Telephone Number>

<Fax Number>

<e-Mail Address>

## <CERTIFICATE OF MAILING>~Recommended to avoid lateness due to mail delay.~

~I certify that the foregoing is being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Trademarks, P.O. Box 1451, Alexandria, VA 22313-1451, on~

<Date of Deposit>

~Signature~ \_\_\_\_\_

<Name>

The information collected on this form allows an applicant to demonstrate that it has commenced use of the mark in commerce. Responses to the request for information are required to obtain the benefit of a registration on the Principal or Supplemental register. 15 U.S.C. §§1058 and 1059 and 37 CFR Part 2, 2.166, 2.168, 2.182, 2.183, and 2.185. All information collected will be made public. Gathering and providing the information will require an estimated 14 minutes. Please direct comments on the time needed to complete this form, and/or suggestions for reducing this burden to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. Please note that the USPTO may not conduct or sponsor a collection of information using a form that does not display a valid OMB control number.

## LINE-BY-LINE HELP INSTRUCTIONS

### TRADEMARK/SERVICE MARK INFORMATION

**Mark:** Enter the word mark in typed form; or, in the case of a design or stylized mark, a brief description of the mark (e.g., "Design of a fanciful cat").

**Registration Number:** Enter the USPTO registration number.

**Registration Date:** Enter the date on which the registration was issued.

### OWNER INFORMATION

**Name:** Enter the full name of the **current** owner of the registration, i.e., the name of the individual, corporation, partnership, or other entity that owns the registration. If joint or multiple owners, enter the name of each of these owners. **Note:** If ownership of the registration has changed, you must establish current ownership, either by (1) recording the appropriate document(s) with the USPTO Assignment Branch; or (2) submitting evidence with this declaration, such as a copy of a document transferring ownership from one party to another. To have the USPTO databases reflect the current owner, you must choose option (1).

**Street:** Enter the street address or rural delivery route where the owner is located.

**City:** Enter the city and/or foreign area designation where the owner's address is located.

**State:** Enter the U.S. state or foreign province in which the owner's address is located.

**Country:** Enter the country of the owner's address. If the address is outside the United States, the owner may appoint a "Domestic Representative" on whom notices or process in proceedings affecting the mark may be served. See "Domestic Representative" section, below.

**Zip/Postal Code:** Enter the owner's U.S. zip code or foreign country postal identification code.

### DOMESTIC REPRESENTATIVE

Complete this section **only** if the address of the current owner is outside the U.S. or one of its territories.

**Name:** Enter the name of the domestic representative.

**Street:** Enter the street address or rural delivery route where the domestic representative is located.

**City:** Enter the city where the domestic representative's address is located.

**State:** Enter the U.S. state in which the domestic representative's address is located.

**Zip Code:** Enter the U.S. zip code.

### GOODS AND/OR SERVICES INFORMATION

**All Goods and/or Services in Existing Registration:** If the owner is NOT using the mark in commerce on or in connection with all of the goods/services identified in the registration, complete the next section. Otherwise, we will presume such use on or in connection with ALL goods and/or services.

**Goods and/or Services to be Deleted:** List the goods and/or services (if any) identified in the registration with which the owner is NO LONGER using the mark in commerce; or, specify an entire international class(es), as appropriate (e.g., Classes 9 & 42). **Note:** If the owner is not currently using the mark in commerce on or in connection with some or all of the identified goods and/or services, but expects to resume use, and the nonuse is due to special circumstances that excuse the nonuse, you must submit a Declaration of Excusable Nonuse under §8.

### FEE INFORMATION

**Combined Sections 8 & 9 Filing Fee:** The filing fee for the Combined §§8 & 9 is \$500.00 per class (\$100.00 per class for the Section 8 Declaration and \$400.00 per class for the renewal application).

**Number of Classes:** Enter the total number of classes (*not* the international class number(s)) to which the Combined §§8 & 9 applies. For example, if the Combined §§8 & 9 applies to Classes 1, 5 and 25, then enter the number "3."

**Filing Fee Due:** Enter total of \$500.00 multiplied by the number of classes; e.g., \$500.00 x 3 = \$1500.00.

**Grace Period Fee:** If filed during the six-month grace period, a late fee of \$200.00 per class must be submitted (\$100.00 for the Section 8 declaration and \$100.00 for the renewal application).

**Number of Classes:** See above.

**Grace Period Fee Due:** Enter total of \$200.00 multiplied by number of classes; e.g., \$200.00 x 3 = \$600.00.  
**Total Fee Paid:** Enter the total of the Filing Fee Due plus the Grace Period Fee Due; e.g., \$1500.00 + \$600.00 = \$2100.00. This amount must either be enclosed (in the form of a check or money order in U.S. currency, made payable to "Commissioner of Patents and Trademarks"), or charged to an already-existing USPTO deposit account.  
**Note:** If the filing is deficient, additional fees may be required.

### **SPECIMEN AND SIGNATURE INFORMATION**

**Specimen(s):** Attach a specimen showing current use of the registered mark in commerce for at least one product or service in each class that the §8 Declaration covers; e.g., tags or labels for goods, and advertisements for services. Please print registration number directly on the specimen (or on a label attached thereto). Specimens must be flat and no larger than 8½ inches (21.6 cm.) wide by 11.69 inches (29.7 cm.) long.

**Signature:** The appropriate person must sign the form. A person who is properly authorized to sign on behalf of the owner is: (1) a person with legal authority to bind the owner; or (2) a person with firsthand knowledge of the facts and actual or implied authority to act on behalf of the owner; or (3) an attorney who has an actual or implied written or verbal power of attorney from the owner.

**Date Signed:** Enter the date the form is signed.

**Name:** Enter the name of the person signing the form.

**Title:** Enter the signatory's title, if applicable, e.g., Vice President, General Partner, etc.

### **CONTACT INFORMATION**

Although this may be the same as provided elsewhere in the document, please enter the following required information for where the USPTO should mail correspondence.

**Name:** Enter the full name of the contact person.

**Company/Firm Name:** Enter the name of the contact person's company or firm.

**Street:** Enter the street address or rural delivery route where the contact person is located.

**City:** Enter the city and/or foreign area designation where the contact person's address is located.

**State:** Enter the U.S. state or Canadian province in which the contact person's address is located.

**Country:** Enter the country of the contact person's address.

**Zip Code:** Enter the U.S. zip code or Canadian postal code.

**Telephone Number:** Enter the appropriate telephone number.

**Fax Number:** Enter the appropriate fax number, if available.

**e-Mail Address:** Enter the appropriate e-mail address, if available.

### **CERTIFICATE OF MAILING**

Although optional, use of this section is recommended to avoid lateness due to mail delay. Papers are considered timely filed if deposited with the United States Postal Service with sufficient postage as first class mail on or before the due date and accompanied by a signed Certificate of Mailing attesting to timely deposit. The USPTO will look to the date shown on the Certificate of Mailing, rather than the date of actual receipt, to determine the timeliness of this document.

**Date of Deposit:** Enter the date of deposit with the United States Postal Service as first class mail.

**Signature:** The person signing the certificate should have a reasonable basis to expect that the correspondence will be mailed on or before the indicated date.

**Name:** Enter the name of the person signing the Certificate of Mailing.