

Notice regarding Section 508 of the Workforce Investment Act of 1998: Section 508 of the Workforce Investment Act of 1998 requires that all U.S. Federal Agencies make their web sites fully accessible to individuals with disabilities. See 29 U.S.C. §794d. While the Trademark Electronic Application System (TEAS) forms do comply with Section 508, the PDF preview of the TEAS forms currently do not meet all standards for web accessibility. If you cannot access a PDF preview of a TEAS form due to a disability or have any questions about this notice, please contact the Trademark Assistance Center (TAC) at 1-800-786-9199 (select option#1), Monday-Friday, 8:30 a.m. to 8 p.m., ET.



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Global Format; No Form Number (Rev 01/2012)
OMB No. 0651-0054 (Exp. 12/31/2020)

Response to Petition to Revive Deficiency Letter Wizard Page

Use this option **ONLY** if a specific TEAS form does not already exist for the purpose of this filing. Please double-check all possible TEAS forms before attempting to proceed.

TIMEOUT WARNING: After 25 minutes of [inactivity](#), you will be prompted to continue your session. If you do not continue within 5 minutes, the session will end, you will be logged out of your USPTO.gov account, and you will lose any unsaved data in the form. Please have all of your information ready before you start.

NOTE: You must complete any field/section preceded by the symbol "*".

WARNING: To use the global form successfully, please note these requirements: Do NOT use your browser's "BACK" or "FORWARD" buttons at any time to navigate through any form; instead, always use the navigational tools provided specifically at the bottom of the form pages. If you have installed anti-spam filters or software on your email service, please ensure that legitimate emails from TEAS@uspto.gov, are not falsely identified as spam or junk.

* Serial/Registration/Reference Number

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Response to Petition to Revive Deficiency Letter Mark Information

Serial Number
Mark
Owner/Holder Information
Attorney Information
Primary Email Address for Correspondence <small>Warning: This is the email address currently of record in the USPTO database. If it is not the email address of either the appointed attorney, if any, otherwise the owner, it must be updated.</small>
Secondary Email Address(es) (Courtesy Copies)

Use this form to update the information above. A current email address must be provided for the trademark owner/holder and the appointed attorney, if any. The **Primary Email Address for Correspondence** is the email address of the attorney, if appointed, if not, the trademark owner/holder. This is the official address for receiving communications from the USPTO. Courtesy email addresses may be provided within this form.

Is a **newly appearing U.S.-licensed attorney** filing this form or do you need to update the bar information, email address, street address, phone or fax number for an already appointed attorney?

Foreign-domiciled owners/holders must have a **U.S.-licensed attorney** represent them before the USPTO in any application-or registration-related filing. [Information about hiring a U.S.-licensed attorney](#) can be found on the USPTO website.

Yes No

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Response to Petition to Revive Deficiency Letter

* Text Entry/File Upload

NOTE: For additional information on how to use the free-text entry box, [click here](#).

SPECIAL FORM INSTRUCTIONS: You **must** provide the following as part of this submission: a complete and full response that addresses **all** issues raised in the deficiency letter.

Text Entry

Style: Font Type: Font Size:

AND/OR

File Upload

WARNING: The file MUST be in JPG/PDF format (not exceeding 5 megabytes per attachment for JPG or 30 megabytes per attachment for PDF) or .WAV, .WMV, .WMA, .MP3, .MPG, or .AVI format (not exceeding 5 megabytes for sound files or 30 megabytes for motion files).

Uploaded Files	
File Name	Action

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Response to Petition to Revive Deficiency Letter Owner Information

Owner Information	
Instructions: 1. Update the mailing address, if needed. The address entered on this page is publicly viewable in the USPTO's TSDR database and is presumed to be the owner's/holder's domicile. 2. Update a domicile address that is not the same as the mailing address: Use the Change Address or Representation form to provide or update a separate domicile address, which is not viewable in TSDR.	
Owner Name	<input type="text"/>
Internal Address	<input type="text"/>
* Street Address (Entered address is viewable in the USPTO's TSDR database. This address must be capable of receiving mail. The USPTO presumes this address is the owner's/holder's domicile. If it is not, enter the domicile address on the Change Address or Representation form.)	<input type="text"/> NOTE: You must limit your entry here, and for all remaining fields within this overall section (except City, see below), to no more than 40 characters (the storage limit for the USPTO database). You may need to abbreviate some words, e.g., St. instead of Street. Failure to do so may result in an undeliverable address, due to truncation at the 40 character limit.
* City	<input type="text"/> NOTE: You must limit your entry here to no more than 22 characters.
* State (Required for U.S. owners/holders)	Select state <input type="text"/> NOTE: You must include as part of the "City" entry any information related to geographical regions (e.g., provinces) not found in the dropdown lists for "States" or "Countries." Enter the city and then the geographical region, separated by a comma (e.g., Toronto, Ontario). In most instances, you will then also have to select the country within which the region is found, below.
* Country/Region/Jurisdiction/U.S. Territory	Select Country/Region/Jurisdiction/U.S. Territory <input type="text"/>
* Zip/Postal Code (Required for U.S. and certain international addresses)	<input type="text"/>
Phone Number	<input type="text"/>
Fax Number	<input type="text"/>
* Email Address	<input type="text"/> The owner/holder is required to provide an email address and keep that address current. If the owner/holder is represented by a U.S.-licensed attorney, only the attorney's email address will be used for correspondence by the USPTO. NOTE: The owner/holder or the owner's/holder's attorney acknowledges that he or she is solely responsible for receiving USPTO emails. Additionally, the owner/holder or the owner's/holder's attorney is responsible for periodically checking the status of the application/registration using the Trademark Status & Document Retrieval (TSDR) system. USPTO notices and office actions issued in this application/registration can be viewed online using TSDR . The USPTO is not responsible for any failure to receive a USPTO-issued email due to the receiver's security or anti-spam software, or any problems with the receiver's email system.

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javascript:popHelp('#FaxNumber');

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Response to Petition to Revive Deficiency Letter Attorney Information

Attorney Information	
<p>Tip: Updating the attorney information will NOT result in an update to the appointed Domestic Representative. Use the Change Address or Representation form to update the address(es) of the Domestic Representative.</p>	
Attorney Name	<input type="text"/>
Individual Attorney Docket/Reference Number	<input type="text"/>
* Bar Membership	* Year of Admission <input type="text" value="Select Year"/>
	* U.S. State/Commonwealth/Territory <input type="text" value="Select state"/>
	* Membership Number <input type="text"/> You must enter "N/A" or a membership number if your U.S. state, commonwealth, or territory issues one. This number is not viewable in TSDR. You must limit your entry here to no more than 40 alphanumeric characters.
<input type="checkbox"/> * The attorney of record is an active member in good standing of the bar of the highest court of a U.S. state, the District of Columbia, or any U.S. Commonwealth or territory.	
Other Appointed Attorney(s)	<input type="text"/>
Recognized Canadian Attorney/Agent	<input type="text"/>
Firm Name	<input type="text"/>
Internal Address	<input type="text"/>
* Street Address	<input type="text"/> NOTE: You must limit your entry here, and for all remaining fields within this overall section (except City, see below), to no more than 40 characters (the storage limit for the USPTO database). You may need to abbreviate some words, e.g., St. instead of Street. Failure to do so may result in an undeliverable address, due to truncation at the 40 character limit.
* City	<input type="text"/> NOTE: You must limit your entry here to no more than 22 characters.
* State (Required for U.S. addresses)	<input type="text" value="Select state"/> NOTE: You must include as part of the "City" entry any information related to geographical regions (e.g., provinces) not found in the dropdown lists for "States" or "Countries." Enter the city and then the geographical region, separated by a comma (e.g., Toronto, Ontario). In most instances, you will then also have to select the country within which the region is found, below.
* Country/Region/Jurisdiction/U.S. Territory	<input type="text" value="Select Country/Region/Jurisdiction/U.S. Territory"/>
* Zip/Postal Code (Required for U.S. and certain international addresses)	<input type="text"/>
Phone Number	<input type="text"/>
Fax Number	<input type="text"/>
* Email Address	<input type="text"/> The appointed attorney's email address must be provided and kept current with the USPTO. NOTE: The owner/holder or the owner's/holder's attorney acknowledges that he or she is solely responsible for receiving USPTO emails. Additionally, the owner/holder or the owner's/holder's attorney is responsible for periodically checking the status of the application/registration using the Trademark Status & Document Retrieval (TSDR) system. USPTO notices and office actions issued in this application/registration can be viewed online using TSDR . The USPTO is not responsible for any failure to receive a USPTO-issued email due to the receiver's security or anti-spam software, or any problems with the receiver's email system.



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javascript:popHelp('#InternetE-MailAddress');

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Response to Petition to Revive Deficiency Letter Correspondence Information

Correspondence Information	
<p>To make changes to the Primary Email Address for Correspondence below, either</p> <ol style="list-style-type: none"> return to the Owner Information section (if no attorney has been appointed) and enter the change, or use the Attorney Information section of the form to enter the change (if an attorney has been appointed). 	
Name	
Email Address	<p>Primary Email Address for Correspondence :</p> <p>Secondary Email Address(es) (Courtesy Copies) :</p> <input type="text"/> <p>Enter up to 4 addresses, separated by either a semicolon or a comma.</p> <p>Only the Primary Email Address for Correspondence is used for official communication by the USPTO. If an attorney has been appointed, the USPTO will correspond ONLY with the appointed attorney; otherwise the USPTO will correspond with the owner/holder. The owner/holder or the attorney must keep this email address current with the USPTO.</p> <p>NOTE: I understand that (1) a valid email address must be maintained by the owner/holder and the owner's/holder's attorney, if appointed, for correspondence and (2) all official trademark correspondence must be submitted via the Trademark Electronic Application System (TEAS).</p>

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Response to Petition to Revive Deficiency Letter Fee Section

To pay a fee for any of the items that may be listed below in the "Additional Fees" portion, use the pull-down menu in the "Multiplier" column to "activate" that fee choice. Repeat as necessary. The "Overall Total Amount" will reflect all selected "Additional Fees," along with any "Required Fees," if specifically so designated in the form.
FOR MULTIPLE EXTENSION REQUESTS: If you need to submit the fees for more than one extension request, multiply the number of classes in your application by the number of extensions you are submitting and include that number in the field of the form that says "Number of Classes." For example, if your application has two classes, and you are submitting the fees for two extensions, include the number "4" in the "Number of Classes" field in order to make the proper payment.

Required Fees				
Fee Information	Per	Multiplier	Fee	Total
No Required Fees				
Required Fees Total				\$0

Additional Fees				
Fee Information	Per	Multiplier	Fee	Total
Petition Fee	Per Application:	0 ▾ x	\$100	\$0
Application for Registration Fee	Number of Classes:	0 ▾ x	\$275	\$0
Allegation of Use Fee	Number of Classes:	0 ▾ x	\$100	\$0
Extension Request Fee	Number of Classes:	0 ▾ x	\$125	\$0
Divisional Request Fee, Per New Application (File Wrapper) Created	Number of New Applications:	0 ▾ x	\$100	\$0
Ex Parte Appeal Fee	Number of Classes:	0 ▾ x	\$200	\$0
Additional Processing Fee for Each Payment Refused or Charged Back	Number of Payments Refused or Charged Back:	0 ▾ x	\$50	\$0
Additional Fees Total				\$0
OVERALL TOTAL AMOUNT				\$0

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Response to Petition to Revive Deficiency Letter Signature Section

To electronically sign this document, enter any alpha/numeric characters (letters/numbers) of **your choosing**, preceded and followed by the forward slash (/) symbol. Most signatories enter their name between the two forward slashes; examples of acceptable "signatures" include: /john doe/; /jd/; or /123-4567/.

DECLARATION SIGNATURE

Click to choose ONE [signature method](#):

- Sign electronically directly on this form
- Email Text Form to second party for electronic signature
- Handwritten pen-and-ink signature

The signatory being 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 the application, submission, or any registration resulting therefrom, declares that the facts set forth above are true; all statements made of his/her own knowledge are true; and all statements made on information and belief are believed to be true.

NOTE: Only one signature is required, regardless of the number of applicants. The person signing for each section may be different, depending on who has the required knowledge to sign.

* Signature	<input type="text"/>	* Date Signed	<input type="text"/> (MM/DD/YYYY)
* Signatory's Name	<input type="text"/> NOTE: The signatory must provide their first and last name. Use the following format: Last Name, First Name Middle Initial or Name, if applicable.		
* Signatory's Position	<input type="text"/> Enter appropriate title or nature of relationship to the owner/holder. If the signer is - An individual owner/holder , enter "Owner" or "Holder" as appropriate. - Joint individual owners/holders , enter "Owners" or "Holders" as appropriate (all must sign this form). - A business entity authorized signatory, enter official title; e.g., "President" (if a corporation), "General Partner" (if a partnership), or "Principal" (if a limited liability company). - A U.S.-licensed attorney , enter "Attorney of record," and if not specified in the application or prior communications, specify at least one state bar admission, e.g., "Attorney of record, New York Bar member." Also, if the signing attorney is from the same U.S. firm as the attorney of record, but was not listed in the original filing and is not otherwise of record, also include law firm name, e.g., Associate Attorney, Smith, Jones & Davis, Virginia Bar member.		
Signatory's Phone Number	<input type="text"/>		

SUBMISSION SIGNATURE

Click to choose ONE [signature method](#):

- Sign electronically directly on this form
- Email Text Form to second party for electronic signature

NOTE: Although a possible combination as selected on the form, the following signing method must NOT be used: declaration signed directly and submission signed through the email text form approach.

*You **must** click **one** of the three buttons below to confirm that you are legally authorized to sign this form based on the trademark rules governing representation of others before the USPTO.

If you have a U.S.-licensed attorney representing you in this application, only your attorney can sign this form.

I am not required to click one of the buttons, *below*, to confirm that I am authorized pursuant to the rules governing representation of others before the USPTO to sign this form under 37 C.F.R. pt. 11, because I am not filing a response as part of this submission.

- Petitioner who is not represented by an attorney (pro se):** I hereby confirm that
 - I am not represented by an attorney in this matter, and am either: (1) the petitioner; or (2) a person or persons with legal authority to bind the petitioner; and
 - If I had previously been represented by an attorney in this matter, either I revoked their power of attorney by filing a signed revocation with the USPTO or the USPTO has granted this attorney's withdrawal request.

ADVISORY: Click the above first button *only* if you are the petitioner or legally authorized to bind the petitioner, such as an officer of the petitioner corporation or association, or a general partner of the petitioner partnership.

- Authorized U.S.-Licensed Attorney:** I hereby confirm that
 - I am a U.S.-licensed attorney who is an active member in good standing of the bar of the highest court of a U.S. state (including the District of Columbia and any U.S. Commonwealth or territory);
 - I am currently the trademark petitioner's attorney or an [associate](#) thereof; and
 - To the best of my knowledge, if prior to my appointment another U.S.-licensed attorney **not currently associated with my company/firm** previously [represented](#) the petitioner in this matter:
 - the petitioner has revoked their power of attorney by filing a signed revocation or substitute power of attorney with the USPTO;
 - the USPTO has granted that attorney's withdrawal request;
 - the petitioner has filed a power of attorney appointing me in this matter; or
 - the petitioner's appointed U.S.-licensed attorney has filed a power of attorney appointing me as an associate attorney in this matter.
- Authorized Canadian Trademark Attorney/Agent:** I hereby confirm that
 - An authorized U.S.-licensed attorney has been appointed to represent the petitioner;
 - I have been granted reciprocal recognition under 37 C.F.R. §11.14(c)(1) by the USPTO's Office of Enrollment and Discipline; and
 - I am an authorized signatory based on 37 C.F.R. §11.14(c)(2).

ADVISORY: Foreign attorneys (other than authorized Canadian attorneys/agents) may not sign this form and are prohibited from representing trademark petitioners/owners/holders before the USPTO in trademark matters.

NOTE: If there is more than one owner/holder, **ALL** must sign the overall submission.

* Signature	<input type="text"/>	* Date Signed	<input type="text"/> (MM/DD/YYYY)
* Signatory's Name	<input type="text"/> NOTE: The signatory must provide their first and last name. Use the following format: Last Name, First Name Middle Initial or Name, if applicable.		
* Signatory's Position	<input type="text"/> Enter appropriate title or nature of relationship to the owner/holder. If the signer is - An individual owner/holder , enter "Owner" or "Holder" as appropriate. - Joint individual owners/holders , enter "Owners" or "Holders" as appropriate (all must sign this form). - A business entity authorized signatory, enter official title; e.g., "President" (if a corporation), "General Partner" (if a partnership), or "Principal" (if a limited liability company). - A U.S.-licensed attorney , enter "Attorney of record," and if not specified in the application or prior communications, specify at least one state bar admission, e.g., "Attorney of record, New York Bar member." Also, if the signing attorney is from the same U.S. firm as the attorney of record, but was not listed in the original filing and is not otherwise of record, also include law firm name, e.g., Associate Attorney, Smith, Jones & Davis, Virginia Bar member.		
Signatory's Phone Number	<input type="text"/>		

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Response to Petition to Revive Deficiency Letter Validation Section

On Thu Jan 02 15:39:02 ET 2020 you completed all mandatory fields. Please continue below to print, download and save, and/or pay/submit this filing.

- STEP 1:** Review the data in various formats, by clicking on the phrases under Data. Use the print function within your browser to print these pages for your own records.
Note: It is important that you review this information for accuracy and completeness now. Corrections after submission may not be permissible, thereby possibly affecting your legal rights.
Note: If you are using the e-signature approach or the handwritten pen-and-ink signature approach, you must click on the final link to access the specific "text form" for that purpose.

Data		
Input	XML File	Text Form

- STEP 2:** If any of the information is incorrect, click on the "Go Back to Modify" button, bottom below, to make changes and then re-validate the form. If no errors are present and you are ready to file, click on the Submit button, which if a fee is required will bring up a screen for you to enter the appropriate payment information. After successful entry of the payment information, you can complete the submission to the USPTO. Or, use the "Save Form" button to save your form.
- STEP 3:** If there are no errors and you are ready to file, confirm the **Primary Email Address for Correspondence**, displayed below. To make changes to this email address, use the navigation buttons below to return to the appropriate page in the form and update either the attorney's email address, if appointed, or the applicant owner's/holder's email address. **Courtesy copies** are also permitted and these email address(es) are displayed below. To update these addresses, use the navigation buttons below to return to the Correspondence Information page and enter the changes.

After you submit the form, the USPTO will send an acknowledgment of receipt to the following email address(es):

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- STEP 4:** Read and check the following:

Important Notice:

Please note that:

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