

TRADEMARK/SERVICE MARK QUESTIONNAIRE

Corporate Name:	
Contact Person/Title	
Address	
City, State, Zip	
Telephone Number	
E-mail Address	
The mark to be registered:	
Style of the mark to be registered:	<p>(Check all that applies)</p> <p><input type="checkbox"/> Words only in plain type (covers all type styles)</p> <p><input type="checkbox"/> Words only in stylized type (enclose your example)</p> <p><input type="checkbox"/> Words in combination with design (enclose your example)</p> <p>Is color part of the mark? ___ Yes ___ No</p>
Owner of mark:	<p>Name of Corporation: _____</p> <p>If a corporation, state of corporation: _____</p> <p>Corporate Document Number: _____</p>
Products/Services:	<p>Explain all services the mark will identify (ex.: construction, restaurant, etc.):</p> <p>_____</p> <p>_____</p>

<p>Service Marks:</p>	<p>Explain all services the mark will identify (ie: hair salon, accounting, etc.)</p> <hr/> <hr/> <hr/> <hr/>
<p>When was the mark first used (products actually sold or services available)?</p>	<p>Date first used anyway? _____</p> <p>If mark is not in use, when do you expect to use it?</p> <hr/> <p>Who originated the mark?</p> <hr/> <hr/>
<p>How is the mark used?</p>	<p>(Check all that apply):</p> <ul style="list-style-type: none"> <input type="checkbox"/> on products <input type="checkbox"/> on packaging for products <input type="checkbox"/> on a website <input type="checkbox"/> in advertising <input type="checkbox"/> on signs <input type="checkbox"/> on signs/displays associated with products <input type="checkbox"/> on labels for products
<p>Specimens of Use</p>	<p>Service Mark: If the mark is used as a services mark for services, then please provide us with four (4) specimens showing the mark used in advertisements for services, etc.) or photographs showing the aforementioned us. Business cards, letter head, envelopes are not acceptable specimens.</p> <p>Trademark: If the mark is used as a trademark on products, then please provide us with (4) specimens showing the mark on the packaging, labels, tags, products, or photographs showing the aforementioned use.</p>

<p>Has the marked been changed since it has been first used?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If so, how? _____</p> <p>_____</p>
<p>Has the mark ever been owned by anyone else?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If so, who? _____</p> <p>_____</p>
<p>How did you get ownership of the mark?</p>	<p>_____</p> <p>_____</p>
<p>Does the owner have any other trademarks?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If so, what and where?</p> <p>_____</p>
<p>Name and title of the person who will sign the application:</p>	<p>_____</p> <p>_____</p>