



**WASHINGTON**  
**Secretary of State**  
Corporations & Charities Division

Corporations & Charities Division

**Physical/Overnight address:**

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Olympia, WA 98501-1226

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Olympia, WA 98504-0234  
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## **INSTRUCTIONS: TRADEMARK AMENDMENT RCW 19.77.030**

**General Instructions:** Use dark ink only. Complete the entire form and enter all requested information in the fields provided. A fillable .pdf version of this form is available for download at <https://www.sos.wa.gov/corps/trademark-home.aspx>

**Mail:** Send completed form and payment to the address listed above.

**Payment:** Make checks or money orders payable to "Secretary of State." Checks cannot be back dated more than 60 days from the date the check is received.

**Fees:** There is no filing fee associated to a Trademark Amendment unless the Trademark Amendment is being submitted to amend the classification. If updating the classification(s) or adding classification(s), the filing fee is \$50 per classification selected.

**Expedited Service:** If expedited service is requested, an *additional* \$50 must be added to the filing fee. Check the box indicating expedited service on page one.

**Purpose:** Trademark Amendment can be used to make changes to a mark that is already on file with the Office of the Secretary of State. Approved changes, per statute, are: classification (removals and additions) and/or placement.

**ALL FILING FEES ARE NON-REFUNDABLE. ALL DOCUMENTS ARE PUBLIC RECORD.**

**(1) Trademark Registration Number:** Provide the Trademark Registration number that was issued by the Washington Secretary of State.

**(2) Trademark Classification Additions:** Only select any **new** goods or services classifications by placing a checkmark in the box next to the appropriate number. Reminder: Fees are based on the number of classifications selected. Refer to [WAC 434-12-015](#) for a complete description of each classification of goods and services. All goods or services that are being added may be included on one Amendment form.

**(3) Trademark Classification Removal:** List any classification numbers that need to be removed from the registration. If no classifications need to be removed, leave this section blank and continue to Section 4.

**(4) Trademark Applicant:** If changed, provide the applicant's name, mailing address, phone number, and email address. The Trademark Applicant is the correspondence contact for this submission.

**(5) Trademark Registrant/Owner:** If contact information has changed, provide the mailing address, phone number, and email address. If changing ownership of the mark, an assignment must be filed separately.

**(6) Trademark Placement:** If adding classifications, describe how the mark is affixed to the goods or displayed with the services added.

**(7) Samples:** Required only if adding classifications, otherwise continue to next section. At least one sample is required showing the mark in use in commerce within the classification(s) selected. If the mark is a logo/design mark and colors are referenced in the trademark description, the sample must be provided in color. The sample must reflect the description registered and show the

placement as described in Section 6. A maximum of 3 samples will be imaged and made available for immediate public viewing. If additional samples are provided, they will be placed on file with this office but not available for public viewing.

Acceptable samples MUST:

- Demonstrate use in commerce.
- Show the Trademark exactly as described.
- Correspond to the classification number(s) added.
- Provide a printed photo only. Do not provide original merchandise.

**(8) Statement Attestation and Signature of Owner or Authorized Representative:** The form must be signed and dated in order to complete the submission. By signing the document the applicant is attesting to the listed statements and executing the application under penalty of law.

If you have questions, need assistance, or would like to provide feedback, visit the Corporations Division website at [sos.wa.gov/corps/trademarks.aspx](https://sos.wa.gov/corps/trademarks.aspx) email [trademarks@sos.wa.gov](mailto:trademarks@sos.wa.gov) or call 360-725-0377 opt 3.



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**No filing fee for non classification changes**

- ☐ **Filing Fee \$50 per Classification**
- ☐ **To Expedite Filing, Add \$50**

## TRADEMARK AMENDMENT

### RCW 19.77.030

**All fields REQUIRED unless otherwise specified**

#### **(1) TRADEMARK REGISTRATION NUMBER:**

Provide the Registration Number of the mark being amended: \_\_\_\_\_

#### **(2) TRADEMARK CLASSIFICATION:** See [WAC 434-12-015](#) for complete classification descriptions

Check all applicable classification numbers BELOW. Multiple classes can be selected. Cost is per classification.

Goods		Goods		Services	
<input type="checkbox"/>	1. Chemicals	<input type="checkbox"/>	18. Leather goods	<input type="checkbox"/>	35. Advertising & business
<input type="checkbox"/>	2. Paints	<input type="checkbox"/>	19. Non-metallic building materials	<input type="checkbox"/>	36. Insurance & financial
<input type="checkbox"/>	3. Cosmetic & cleaning preparations	<input type="checkbox"/>	20. Furniture & other articles not otherwise classified	<input type="checkbox"/>	37. Building construction & repair
<input type="checkbox"/>	4. Lubricants & fuels	<input type="checkbox"/>	21. Housewares & glass	<input type="checkbox"/>	38. Telecommunications
<input type="checkbox"/>	5. Pharmaceuticals	<input type="checkbox"/>	22. Cordage and fibers	<input type="checkbox"/>	39. Transportation & storage
<input type="checkbox"/>	6. Metal goods	<input type="checkbox"/>	23. Yarns and threads	<input type="checkbox"/>	40. Treatment of materials
<input type="checkbox"/>	7. Machinery	<input type="checkbox"/>	24. Fabrics	<input type="checkbox"/>	41. Education & entertainment
<input type="checkbox"/>	8. Hand tools	<input type="checkbox"/>	25. Clothing	<input type="checkbox"/>	42. Computer & scientific
<input type="checkbox"/>	9. Electrical & scientific apparatus	<input type="checkbox"/>	26. Fancy goods	<input type="checkbox"/>	43. Hotels & restaurants
<input type="checkbox"/>	10. Medical apparatus	<input type="checkbox"/>	27. Floor coverings	<input type="checkbox"/>	44. Medical, beauty & agriculture
<input type="checkbox"/>	11. Environmental control apparatus	<input type="checkbox"/>	28. Toys & sporting goods	<input type="checkbox"/>	45. Personal & legal
<input type="checkbox"/>	12. Vehicles	<input type="checkbox"/>	29. Meats & processed foods		
<input type="checkbox"/>	13. Firearms	<input type="checkbox"/>	30. Staple foods		
<input type="checkbox"/>	14. Jewelry	<input type="checkbox"/>	31. Natural agricultural products		
<input type="checkbox"/>	15. Musical instruments	<input type="checkbox"/>	32. Light beverages		
<input type="checkbox"/>	16. Paper goods & printed matter	<input type="checkbox"/>	33. Wines and spirits		
<input type="checkbox"/>	17. Rubber goods	<input type="checkbox"/>	34. Smokers' articles		

#### **(3) TRADEMARK CLASSIFICATION REMOVAL:** *Required if changed*

List any classification numbers that are being **removed** from this registration:

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**(4) TRADEMARK APPLICANT:** Trademark Application will receive renewal notifications

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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**(5) TRADEMARK REGISTRANT/OWNER:** *Required only if changed*

*The ownership can only be changed through an assignment. The below is to update the owner contact information only*

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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**(6) TRADEMARK PLACEMENT:** *Required if changed*

How is the mark affixed to goods or displayed with services? *(Attach additional pages if needed.)*

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**(7) SAMPLES:** *Required only if adding classifications or changing placement description*

Attach a sample of the mark for each classification number. Acceptable samples must: (1) be clearly visible on the goods or displayed with the services; and (2) demonstrate use in commerce.

*Sample(s) must be submitted with this form.*

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**(8) STATEMENT ATTESTATION AND SIGNATURE OF OWNER OR AUTHORIZED REPRESENTATIVE:**

The Trademark is presently in use in the State of Washington.

The applicant believes himself or herself to be the owner of the trademark and believes that no other person has the right to use such a trademark in connection with the same or similar goods or services in this state either in the identical form or in such near resemblance thereto as to be likely, when used on or in connection with the goods or services of such other person, to cause confusion or mistake or to deceive.

**I hereby certify, under penalty of law, that the above information is accurate and complies with the filing requirements of state law.**

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**Signature**

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**Printed Name/Title**

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**Date**