



Physical/Overnight address:

801 Capitol Way S
Olympia, WA 98504-1226

Mailing address:

PO Box 40234
Olympia, WA 98504-0234
Tel: 360.725.0377
sos.wa.gov/corps

INSTRUCTIONS: TRADEMARK RENEWAL RCW 19.77.050

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 sos.wa.gov/corps/trademark-home.aspx

Mail: Send the completed form and payment to the address listed above. **The post mark date is not the received date.** If the renewal is received in our office past the expiration date, a new registration form must be submitted and a new registration number will be issued.

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

Fees: The filing fee for the Trademark Renewal 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.

Reminder: A trademark may renew up to 6 months prior to its expiration date. To find a trademark's expiration date, visit ccfs.sos.wa.gov/ and use the "Trademark Search" located at the bottom of the webpage.

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.

Trademark Classification(s): Select the goods or services classifications that represent how the trademark will be used in commerce by placing a check mark in the box next to the appropriate number. Reminder: Fees are based on the number of classifications selected. Refer to [WAC 434-12-015](https://www.wa.gov/legislation/wac/434-12-015) for a complete description of each classification. All goods or services that the mark is representing may be included on one application. Classifications may be added, removed or changed at the time of renewal or by submitting a Trademark Amendment form.

(3) Trademark Applicant: Provide the applicant's name, mailing address, phone number, and email address. The Trademark Applicant is the correspondence contact for this submission and renewal notifications.

(4) 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.

(5) Trademark Placement: Describe how the mark is affixed to the goods or displayed with the services selected.

Samples: 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 4. 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) selected.
- Provide a printed photo only. Do not provide original merchandise.

(7) Statement Attestation and Signature of Owner or Authorized Representative: Sign, print, provide the signer's title, and date the document. 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 email trademarks@sos.wa.gov or call 360-725-0377 opt 3.



Physical/Overnight address: 801 Capitol Way S Olympia, WA 98501-1226

Mailing Address: PO Box 40234 Olympia, WA 98504-0234

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

TRADEMARK RENEWAL

[RCW 19.77.050](#)

All fields **REQUIRED** unless otherwise specified

(1) TRADEMARK REGISTRATION NUMBER:

Registration Number: _____

(2) TRADEMARK CLASSIFICATION(S): 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 APPLICANT: Trademark Application will receive renewal notifications

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

(4) 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: _____

(5) TRADEMARK PLACEMENT:

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

(6) SAMPLES:

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.

(7) 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.

Signature

Printed Name/Title

Date