



Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number.  
PTO Form 1581 (Rev 09/2005)  
OMB No. 0651-0054 (Exp. 10/31/2017)

## Request for Extension of Time to File a Statement of Use

TEAS - Version 5.4 : 07/11/2015

You may file an Extension of Time ONLY *after* a Notice of Allowance for the application has been issued.

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

**WARNING:** This form has a session time limit of 60 minutes. Your "session" began as soon as you accessed this initial Form Wizard page. If you exceed the 60-minute time limit, the form will not validate and you must begin the entire process again; you can, however, [extend the time limit](#). You should always try to have all information required to complete the form prior to starting any session.

\* [Serial Number](#):

*(required only if completing the SOU Extension Request form; otherwise, access saved form, below)*

OR

Access **previously-saved data** using the "Browse/Choose File" button below to access the file from your local drive. **NOTE: For specific instructions, please click [here](#). FAILURE TO FOLLOW THESE INSTRUCTIONS WILL RESULT IN THE DISPLAY OF YOUR DATA IN AN XML FORMAT THAT CANNOT BE EDITED. NOTE: Do NOT attempt to use the button below to upload an image file (for example, a specimen). You must use the button that will be presented for that purpose *within the proper section of the actual form*.**

no file selected

If appropriate to file at this time, please answer all of the questions below to create an Extension of Time form showing only sections relevant to you. Then press the NEXT button. For more information regarding any of the following questions or topics, either go to [HELP](#) or click on the underlined word.

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Each hyperlinked term links to relevant information that will appear in a pop-up window.

Important: ONCE THIS FORM IS SUBMITTED ELECTRONICALLY, THE USPTO WILL IMMEDIATELY PROVIDE THE SENDER WITH AN ELECTRONIC ACKNOWLEDGMENT OF RECEIPT. Please contact [TEAS@uspto.gov](mailto:TEAS@uspto.gov) if you do not receive this acknowledgment within 24 hours of transmission (or by the next business day).

*i*

### Contact Points:

For general trademark information, please e-mail [TrademarkAssistanceCenter@uspto.gov](mailto:TrademarkAssistanceCenter@uspto.gov), or telephone 1-800-786-9199. If you need help in resolving technical glitches, please e-mail [TEAS@uspto.gov](mailto:TEAS@uspto.gov). Please include your telephone number in your e-mail, so we can talk to you directly, if necessary. For status information, use <http://tsdr.uspto.gov>.

NOTE ABOUT STATUS CHECKS: Do NOT attempt to check the status of a filing until at least 72 hours after submission of the filing, to allow sufficient time for our databases to be updated.

### \* **Instructions:**

To file this Statement of Use (SOU) Extension Request electronically, please complete the following steps:

**Step 1.** Fill out all fields for which information is known. Fields with a \* symbol are mandatory for filing purposes and must be completed.

**Step 2.** Validate the form, using the **Validate** button at the end of the form. If there are errors, go back to step 1.

**Step 3.** If validation of all mandatory fields is successful, you will be navigated to a confirmation screen.

|   |  |
|---|--|
| <b>Serial Number</b>                                      | <a href="#">00000000</a>   |
| <b>Mark</b>   |  |
| <b>Currently Authorized Correspondence E-mail Address</b> | <b>Primary Email Address:</b><br><b>Secondary Email Address:</b> |

**NOTE:** If the correspondence information above includes an e-mail address that is no longer correct or contains a typographical error, please use this form to update or correct the e-mail address AND reauthorize the USPTO to communicate with you by e-mail. If the correspondence information above does NOT include an e-mail address, you are encouraged to use this form to enter an e-mail address and provide authorization for the USPTO to communicate with you by e-mail, which would enable you to be notified immediately when an Office action or official notice issues. It is important that you maintain a current e-mail address with the USPTO so that you are able to receive critical correspondence. For assistance in resolving any technical issues with this process, please contact [TEAS@uspto.gov](mailto:TEAS@uspto.gov).

**WARNING:** For an application filed under TEAS Plus or TEAS RF, the failure to maintain a correct and authorized e-mail address for ongoing e-mail communication will result in the loss of TEAS Plus or TEAS RF status and a requirement to pay a processing fee of \$50 per class.

### Notice of Allowance Information

**Notice of Allowance Mailing Date:** 00/00/0000

**Applicant requests a six-month extension of time to file the Statement of Use under 37 C.F.R. § 2.89 in this application.**

**Extension Request Periods****Number of Extension Request: 1****Statement of Use Submitted**

Check here if a Statement of Use has already been submitted or is being submitted with this Extension request as evidence that the applicant believes that it has made valid use of, or if applicable, has exercised legitimate control over the use of, the mark in commerce. If the USPTO finds the Statement of Use to be fatally defective, the applicant requests additional time to file an amended or substitute Statement of Use.

**Request to Divide**

Check here if you either submitted a Request to Divide in paper or are filing a Request to Divide as part of the TEAS Statement of Use form. **PLEASE NOTE:** You must submit the request to divide in conjunction with a timely filed SOU unless an additional basis for registration already exists for the specific goods/services identified as not being covered by this extension request. The mere filing of an extension request without the divisional request and a timely filed SOU is not sufficient. Accordingly, if you do not file a timely request to divide (and statement of use, if required), the goods/services not covered by this extension will be deleted from the application and cannot later be reinserted. For more information on filing a Request to Divide, review TMEP §§ 1110-1110.07.

**1. Is a [newly appearing attorney](#) filing this form?**

**NOTE:** Do NOT attempt to appoint a new attorney within this form. If an attorney of record exists, you must use the [revocation/appointment](#) form for that specific purpose.

Yes No

**2. Do you need to change [correspondence address](#)?**

Yes No

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### Owner Information

Check this box to **modify** the owner name that appears below if the name does not identify the current owner of the application.  
 Note: If this change relates to a change in the correspondence address or e-mail, please use the "Correspondence Information" section of this form.

**\*Name**

WARNING: If the name appearing immediately above is not the name of the current owner of the application, you must change the owner information prior to transmission of this form.

**1. Transfer of Mark**

If there has been a transfer of ownership after filing the application, you should record this transfer with the Assignment Recordation Branch. This can be filed through the USPTO website at <http://etas.uspto.gov>. In the alternative, you may submit evidence of the change in ownership without recording it, by either submitting a copy of the document transferring ownership, or an explanation of the transfer, supported by an affidavit or declaration under 37 C.F.R. § 2.20. However, the USPTO records will not be updated and the registration will not issue in the correct owner name unless you record the transfer with the Assignment Recordation Branch.

**2. Mistake in owner name**

If a minor clerical error appears in the owner's name or a non-existent legal entity was improperly identified as the owner, you may correct this mistake on the form. However, you must separately explain in the "Miscellaneous Statement" portion of this form the reason for the correction. Failure to submit an explanation will result in an Office action being issued before your extension request may be granted. NOTE: You may not add a different owner or designate another legal entity as the applicant. For examples of correctable errors, see [TMEP § 1201.02\(c\)](#).

To enter the change in the owner name:

- (1) check the box above (top) that appears to the left of the words "Check this box to modify the owner name that appears below if the name does not identify the current owner of the application.";
- (2) delete the name that appears immediately above;
- (3) type in the name of the current owner of the application; and
- (4) explain why you are changing the owner in the "Miscellaneous Statement" field.

**Internal Address**

**\*Street Address**

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**

NOTE: You must limit your entry here to no more than 22 characters.

**\* State**

(Required for U.S. applicants only)

Florida

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 or U.S. Territory**

United States

**\* Zip/Postal Code**  
 (Required for U.S. applicants only)

**Phone Number**

**Fax Number**

**Internet  
E-mail**

While you may list an e-mail address for the applicant, the applicant's attorney, and/or the applicant's domestic representative, only one e-mail address may be used for correspondence, in accordance with [USPTO policy](#). You must keep this address current in the USPTO's records.

Check here to [authorize](#) the USPTO to communicate with the applicant or its representative via e-mail.

**NOTE:** By checking this box, you acknowledge sole responsibility for receipt of USPTO documents sent via e-mail. You should periodically check the status of your filing through the [Trademark Status & Document Retrieval \(TSDR\)](#) system, to see if the USPTO has e-mailed an Office action. If an action has been sent to the provided e-mail address, the USPTO is not responsible for any e-mail not received due to e-mail security or anti-spam software, or any other problems with your e-mail system. All sent actions can be viewed online, via the [TSDR](#) system.

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## Request for Extension of Time to File a Statement of Use

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### Goods/Services/Collective Membership Organization Information

**WARNING:** If you recently added or deleted a class(es) of goods/services/a collective membership organization, and the correct class(es) are not displayed below, do not use this form. You must wait until the changed data uploads into the USPTO databases, so that the display is correct before proceeding.

**WARNING: Registration Subject to Cancellation for Fraudulent Statements**

You must ensure that statements made in filings to the USPTO are accurate, as inaccuracies may result in the cancellation of a trademark registration. The lack of a bona fide intention to use the mark with all goods/services, or to indicate membership in the collective organization included in an application, or the lack of use on all goods/services, or to indicate membership in the collective organization for which you claim use, could jeopardize the validity of the registration and result in its cancellation.

#### Enter information for the Class

\*[International Class](#): 000

Current listing of goods/services/the nature of the collective membership organization:

**For a trademark or service mark:** The applicant has a continued bona fide intention, and is entitled, to use the mark in commerce on or in connection with [all of the goods/services listed in the Notice of Allowance](#) or as subsequently modified for this specific class; **for a collective/certification mark:** the applicant has a continued bona fide intention, and is entitled, to exercise legitimate control over the use of the mark in commerce on or in connection with the goods/services/collective membership organization listed in the Notice of Allowance, or as subsequently modified for this specific class.

This filing does **not** cover this specific class. This entire class is to be **permanently deleted** from the application OR **processed according to a Request to Divide**.

**Deleted/Divided Goods/Services:** This filing does **NOT** cover the following goods/services listed in either the application or Notice of Allowance or as subsequently modified for this specific class; these goods/services are being **permanently deleted** or **included in a separately filed Statement of Use with a Request to Divide**:

**LEAVE THIS SPACE BLANK IF THE FILING COVERS ALL THE GOODS/SERVICES IN THE NOTICE OF ALLOWANCE FOR THIS SPECIFIC CLASS. ONLY ENTER THE GOODS/SERVICES TO BE DELETED OR THAT ARE INCLUDED IN A SEPARATELY FILED STATEMENT OF USE WITH A REQUEST TO DIVIDE.**

**Remaining Goods/Services:** The applicant has a continued bona fide intention to use the mark in commerce on or in connection with the following goods/services listed in either the application or Notice of Allowance or as subsequently modified for this specific class:

**ENTER HOW THE COMPLETE "FINAL" LISTING SHOULD READ THAT WILL IDENTIFY THE GOODS/SERVICES FOR WHICH THE APPLICANT HAS A CONTINUED BONA FIDE INTENTION TO USE THE MARK IN COMMERCE FOR THIS SPECIFIC APPLICATION ( i.e., REMOVE THOSE GOODS/SERVICES IDENTIFIED IN THE PRECEDING BOX). DO NOT ADD OR MODIFY ANY OTHER WORDING, AS SUCH CHANGES MAY NOT BE ACCEPTED BY THE USPTO.**

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### Miscellaneous Information

**To attach your file, please note that:**

\*JPG/PDF image file(s) must be on your local drive.

0 file(s) attached

**Miscellaneous Statement:** Enter information for which no other section of the form is appropriate.

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| Correspondence Information  |  |
|---|--|
| * <a href="#">Correspondent Name</a>                                    |  |
| <a href="#">Firm Name</a>   |  |
| <a href="#">Docket/Reference Number</a>                                 |  |
| <a href="#">Internal Address</a>  |  |
| * <a href="#">Street Address</a>  | <b>NOTE:</b> You must limit your entry here, and for all remaining fields within this overall section (except City, see <i>below</i> ), 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.  |
| * <a href="#">City</a>  | <b>NOTE:</b> You must limit your entry here to no more than 22 characters.   |
| * <a href="#">State</a><br>(Required for U.S. addresses only)           | Colorado<br><b>NOTE:</b> 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.   |
| * <a href="#">Country or U.S. Territories</a>                           | United States  |
| * <a href="#">Zip/Postal Code</a><br>(Required for U.S. addresses only) |  |
| <a href="#">Phone Number</a>  |  |
| <a href="#">Fax Number</a>  | Primary Email Address<br>Secondary Email Address(es)<br>Enter up to 4 addresses, separated by either a <b>semicolon</b> or a <b>comma</b> .  |
| <a href="#">Internet E-mail Address</a>                                 | <p>Check here to <a href="#">authorize</a> the USPTO to communicate with the applicant or its representative via e-mail.</p> <p><b>NOTE:</b> While you may list an e-mail address for the applicant, the applicant's attorney, and/or the applicant's domestic representative, <b>only</b> one e-mail address may be used for correspondence, in accordance with <a href="#">USPTO policy</a>. You must keep this address current in the USPTO's records.</p> <p><b>NOTE:</b> By checking this box, you acknowledge sole responsibility for receipt of USPTO documents sent via e-mail. You should periodically check the status of your filing through the <a href="#">Trademark Status &amp; Document Retrieval (TSDR)</a> system, to see if the USPTO has e-mailed an Office action. If an action has been sent to the provided e-mail address, the USPTO is not responsible for any e-mail not received due to e-mail security or anti-spam software, or any other problems with the applicant's, the applicant's attorney's, or the applicant's domestic representative's e-mail system. All sent actions can be viewed on-line, via the <a href="#">TSDR</a> system.</p> |

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### FEE INFORMATION

**Extension Filing fee per Class = \$150**

Note: The total fee is computed based on the Number of Classes in which the goods/services/collective membership organization associated with the mark is/are classified.

Amount

**Number of Classes: 1**

**TOTAL AMOUNT (Number of Classes x \$150): 150**

NOTE: Three payment options ([credit card](#), [automated deposit account](#), and [Electronic Funds Transfer](#)) will appear after clicking on the PAY/SUBMIT button, which is available on the bottom of the Validation Page after completing and validating this form.

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### Signature Information

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

[Sign directly](#)

[E-mail Text Form to second party for signature](#)

[Handwritten pen-and-ink signature](#)

### Electronic Signature

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

STATEMENTS: The signatory believes that: the applicant has a continued bona fide intention, and is entitled, to use the mark in commerce on or in connection with all the goods/services under Section 1(b) in the notice of allowance or as subsequently modified, or, if applicable, the applicant has a continued bona fide intention, and is entitled, to exercise legitimate control over the use of the mark in commerce on or in connection with all the goods/services/collective membership organization under Section 1(b) in the notice of allowance or as subsequently modified; and that to the best of the signatory's knowledge and belief, no other persons, except, if applicable, members and concurrent users, have the right to use the mark in commerce, either in the identical form or in such near resemblance as to be likely, when used on or in connection with the goods/services/collective membership organization of such other persons, to cause confusion or mistake, or to deceive.

DECLARATION: 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 or submission or any resulting registration, declares that all statements made of his/her own knowledge are true and that all statements made on information and belief are believed to be true.

|   |  |                                      |              |
|---|--|--------------------------------------|--------------|
| <b>* <a href="#">Signature</a></b>              | NOTE: Only one signature is required, regardless of the number of applicants. To add a signature option, if appropriate, use the "Add Signatory" button, below.  | <b>* <a href="#">Date Signed</a></b> | (MM/DD/YYYY) |
| <b>* <a href="#">Signatory's Name</a></b>       |  |                                      |              |
| <b>* <a href="#">Signatory's Position</a></b>   | NOTE: Enter the appropriate title or the nature of the relationship to the applicant - if an individual, enter "Owner"; if an attorney, enter "Attorney of record, [specify at least one state] bar member, " e.g., "Attorney of record, New York bar member"; if an authorized signatory of a business entity enter, e.g., "President," "Vice President," "General Partner" (if a partnership), or "Principal" (if a limited liability company). The designation "authorized signatory" is not acceptable.<br>If the attorney signing 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, include firm name to establish acceptability of signature, e.g., Associate Attorney, Smith, Jones & Davis, Virginia Bar Member. |                                      |              |
| <b><a href="#">Signatory's Phone Number</a></b> |  |                                      |              |



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### Validation Page

On \_\_\_\_\_ You completed all mandatory fields (but we have not yet determined whether the information is correct). Please continue below either to print the Extension of Time, download and save it, or electronically pay the filing fee and submit the validated Extension of Time to the USPTO for filing.

■ **STEP 1:** To review the Extension of Time data in various formats, click on the appropriate phrase(s) below. Use the print function within your browser to print these pages for your own records.

#### Application Data

■ [Input](#)

■ [XML File](#)

■ [Text Form](#)

■ **STEP 2:** If any of the information is incorrect, click on the Go Back to Modify button at the bottom of this page to return to the Extension of Time form and make changes.

■ **STEP 3:** If there are no errors and you are ready to file electronically, confirm the e-mail address for acknowledgment. Once you submit electronically, we will send an electronic acknowledgment of receipt to the e-mail address entered below. If no e-mail address appears, you must enter one. If we should send the acknowledgment to a different e-mail address, or to an additional address(es), please enter the proper address or additional address(es). For **multiple addresses/receipts**, please separate e-mail addresses by either a **semicolon** or a **comma**.

*NOTE:* This e-mail address is only for the purpose of receiving the acknowledgment that the transmission reached the USPTO, and is not related to the e-mail that will be used for correspondence purposes (although it could be the same address). The official e-mail address that the USPTO will use for any communication is whatever appears in the record for that purpose. If necessary, use the Correspondence Information section of this form to update an e-mail address, as it will NOT be changed based on the specific entry below.

|  |  |
|--|--|
| * E-mail for acknowledgment  |  |
| To ensure we can deliver your e-mail confirmation successfully, please re-enter your <b>e-mail address(es)</b> here: |  |
| * E-mail for acknowledgment  |  |

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

#### Important Notice:

Please note that:

- (1) Once you submit an Extension of Time, either electronically or through the mail, we will not cancel the filing or refund your fee, because it is a processing fee for our substantive review.
- (2) All information you submit to the USPTO at any point in the application and/or registration process will become public record, including your name, phone number, e-mail address, and street address. By filing this document, you acknowledge that **YOU HAVE NO RIGHT TO CONFIDENTIALITY** in the information disclosed. The public will be able to view this information in the USPTO's on-line databases and through internet search engines and other on-line databases. This information will remain public even if the application is abandoned or any registration is surrendered, cancelled, or expired. To maintain confidentiality of banking or credit card information, only enter payment information in the secure portion of the site after validating your form. For any information that may be subject to copyright protection, by submitting it to the USPTO, the filer is representing that he or she has the authority to grant, and is granting, the USPTO permission to make the information available in its on-line database and in copies of the application or registration record.
- (3) Private companies **not** associated with the USPTO often use trademark application and registration information from the USPTO's databases to [mail or e-mail trademark-related solicitations](#) (samples of non-USPTO solicitations included).

If you have read and understand the above notice, please check the box before you click on the **Pay/Submit** button.

■ **STEP 5:** To download and save the form, click on the Download [Portable Data](#) button at the bottom of this page. The information will be saved to your local drive. To begin the submission process with saved data, you must open a new form, and click on the "Browse/Choose File" button displayed on the initial form wizard page, at "[OPTIONAL] To access previously-saved data, use the "Browse/Choose File" button below to access the file from your local drive." **REMINDER:** Do **NOT** try to open the saved .xml form directly. You must return to the very first page of the form, *as if starting a brand new form*, and then use the specific "Browse/Choose File" button on that page to import the saved file. Clicking on the "Continue" button at the bottom of that first page will then properly open the saved version of your form.

■ **STEP 6:** If you are ready to file electronically:

Click on the Pay/Submit button, below, to access the site where you will select one of three possible payment methods. After successful entry of payment information, you can complete the submission to the USPTO. A valid transaction will result in a screen that says **SUCCESS!** Also, we will send an e-mail acknowledgment within 24 hours.

**WARNING:** Click on the Pay/Submit button below **ONLY** if you are now entirely prepared to complete the Pay/Submit process. After clicking the button, you can **NOT** return to the form, since you will have left the TEAS site entirely. Once in the separate payment site, you must complete the Pay/Submit process within 30 minutes. If you are not prepared to complete the process now, you should select the "Download Portable Data" option to save your form, and then complete the Pay/Submit process later. Or, if you have discovered any error, use the "Go Back to Modify" button to make a correction.

**WARNING:** You can **NOT** make any fee payments by *credit card* from 2 a.m. to 6 a.m. Sunday EST. To file during this specific period, you **must** use either the deposit account or electronic funds transfer payment method; or, you may use the "Download Portable Data" option to save your form, and then complete the Pay/Submit process at a later time with the credit card payment option.

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## Request for Extension of Time to File a Statement of Use

The table below presents the data as entered.

| Input Field                             | Entered         |
|---|-----------------|
| <b>SERIAL NUMBER</b>                    | 00000000        |
| <b>LAW OFFICE ASSIGNED</b>              | LAW OFFICE ____ |
| <b>MARK SECTION</b>                     |                 |
| <b>MARK</b>                             |                 |
| <b>STANDARD CHARACTERS</b>              |                 |
| <b>USPTO-GENERATED IMAGE</b>            |                 |
| <b>LITERAL ELEMENT</b>                  |                 |
| <b>MISCELLANEOUS STATEMENTS SECTION</b> |                 |
| <b>MISCELLANEOUS STATEMENT</b>          |                 |
| <b>OWNER SECTION (current)</b>          |                 |
| <b>NAME</b>                             |                 |
| <b>STREET</b>                           |                 |
| <b>CITY</b>                             |                 |
| <b>STATE</b>                            |                 |
| <b>ZIP/POSTAL CODE</b>                  |                 |
| <b>COUNTRY</b>                          |                 |
| <b>OWNER SECTION (proposed)</b>         |                 |
| <b>NAME</b>                             |                 |
| <b>INTERNAL ADDRESS</b>                 |                 |
| <b>STREET</b>                           |                 |
| <b>CITY</b>                             |                 |
| <b>STATE</b>                            |                 |
| <b>ZIP/POSTAL CODE</b>                  |                 |
|   |                 |

|   |  |
|---|--|
| <b>COUNTRY</b>                              |  |
| <b>CORRESPONDENCE SECTION (current)</b>     |  |
| <b>NAME</b>                                 |  |
| <b>FIRM NAME</b>                            |  |
| <b>STREET</b>                               |  |
| <b>CITY</b>                                 |  |
| <b>STATE</b>                                |  |
| <b>POSTAL CODE</b>                          |  |
| <b>COUNTRY</b>                              |  |
| <b>PHONE</b>                                |  |
| <b>FAX</b>                                  |  |
| <b>EMAIL</b>                                |  |
| <b>AUTHORIZED TO COMMUNICATE VIA E-MAIL</b> |  |
| <b>DOCKET/REFERENCE NUMBER</b>              |  |
| <b>CORRESPONDENCE SECTION (proposed)</b>    |  |
| <b>NAME</b>                                 |  |
| <b>FIRM NAME</b>                            |  |
| <b>STREET</b>                               |  |
| <b>CITY</b>                                 |  |
| <b>STATE</b>                                |  |
| <b>POSTAL CODE</b>                          |  |
| <b>COUNTRY</b>                              |  |
| <b>PHONE</b>                                |  |
| <b>FAX</b>                                  |  |
| <b>EMAIL</b>                                |  |
| <b>AUTHORIZED TO COMMUNICATE VIA E-MAIL</b> |  |
| <b>GOODS AND/OR SERVICES SECTION</b>        |  |
| <b>INTERNATIONAL CLASS</b>                  |  |
| <b>CURRENT IDENTIFICATION</b>               |  |
| <b>GOODS OR SERVICES</b>                    |  |
| <b>REQUEST TO DIVIDE</b>                    |  |
| <b>EXTENSION SECTION</b>                    |  |
|   |  |

|                             |            |
|-----------------------------|------------|
| <b>EXTENSION NUMBER</b>     | 1          |
| <b>ALLOWANCE MAIL DATE</b>  | 00/00/0000 |
| <b>STATEMENT OF USE</b>     |            |
| <b>PAYMENT SECTION</b>      |            |
| <b>NUMBER OF CLASSES</b>    | 1          |
| <b>SUBTOTAL AMOUNT</b>      | 150        |
| <b>TOTAL AMOUNT</b>         | 150        |
| <b>SIGNATURE SECTION</b>    |            |
| <b>SIGNATURE</b>            | / /        |
| <b>SIGNATORY'S NAME</b>     |            |
| <b>SIGNATORY'S POSITION</b> |            |
| <b>DATE SIGNED</b>          | 00/00/0000 |

**Request for Extension of Time to File a Statement of Use  
(15 U.S.C. Section 1051(d))**

To the Commissioner for Trademarks:

**MARK:**

**SERIAL NUMBER:** 00000000

The applicant, \_\_\_\_\_ having an address of \_\_\_\_\_

requests a six-month extension of time to file the Statement of Use under 37 C.F.R. Section 2.89 in this application. The Notice of Allowance mailing date was 00/00/0000.

For International Class 000:

Current identification: \_\_\_\_\_

For a trademark/service mark: The applicant has a continued bona fide intention, and is entitled, to use the mark in commerce on or in connection with all of the goods/services listed in the Notice of Allowance or as subsequently modified for this specific class; for a collective/certification mark: the applicant has a continued bona fide intention, and is entitled, to exercise legitimate control over the use of the mark in commerce on or in connection with the goods/services/collective membership organization listed in the Notice of Allowance, or as subsequently modified for this specific class.

The applicant has submitted a Request to Divide in paper or is filing a Request to Divide as part of the TEAS Allegation of Use form.

This is the first extension request.

The applicant's current Correspondence Information: \_\_\_\_\_ of \_\_\_\_\_

The docket/reference number is \_\_\_\_\_.

The applicant's proposed Correspondence Information: \_\_\_\_\_ of \_\_\_\_\_

The phone number is \_\_\_\_\_.

The fax number is \_\_\_\_\_.

The email address is \_\_\_\_\_.

**MISCELLANEOUS STATEMENTS**

A fee payment in the amount of \$150 will be submitted with the form, representing payment for 1 class.

**Declaration**

STATEMENTS: The signatory believes that: the applicant has a continued bona fide intention, and is entitled, to use the mark in commerce on or in connection with all the goods/services under Section 1(b) in the notice of allowance or as subsequently modified, or, if applicable, the applicant has a continued bona fide intention, and is entitled, to exercise legitimate control over the use of the mark in commerce on or in connection with all the goods/services/collective membership organization under Section 1(b) in the notice of allowance or as subsequently modified; and that to the best of the signatory's knowledge and belief, no other persons, except, if applicable, members and concurrent users, have the right to use the mark in commerce, either in the identical form or in such near resemblance as to be likely, when used on or in connection with the goods/services/collective membership organization of such other persons, to cause confusion or mistake, or to deceive.

DECLARATION: 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 or submission or any resulting registration, declares that all statements made of his/her own knowledge are true and that all statements made on information and belief are believed to be true.

Signature: // Date Signed: 00/00/0000

Signatory's Name:

Signatory's Position: