

COMMUNITY TRADEMARKS

The fields marked with asterisk (*) can't be left empty

DENOMINATION FOR REGISTRATION

Name *
Products
Services
Activitis *
Kind * Spanish denominative trademark
 Spanish graphic trademark

Company or companies and/or physical person or people in the name of whom the protection of this denomination is asked for:

Name/s *
Address/es *
Town * CP *

WITH GRAPHIC DESIGN

Yes Send by post
 Send by e-mail
No

KIND OF DENOMINATION CHOSEN

If you have applied for a trademark in any State, specify it. If you have exhibit your products or services in any expo or any fair, specify it. Otherwise, ignore this section.

Priority claim (6 month maxium) (Example: 01/02/99)
Application form (example: trademark, trade name, etc.)
Granted in the country Expo name
Carry out in the town of 1st. date of the goods/services exhibition in the expo

NAME AND ADDRESS FOR BUSINESS CONTACTS

Company and/or Physical Person *

Adress

Town

Other address requeriments

Woman/man for business contact *

Tel *

E-mail*

Postal code (zip)
Country

Boss of

Fax

http://

HOW DO YOU WISH TO PAY IT? *

By credit card

Visa Mastercard American Express Diners Club

Credit Card N.
Expires end
Name

I authorize to charge in my
credit card the amount of:

Euros

**International money
order**

Count: 2100-0857-38-0200287657-SWIFT
CAIX ES BB

WE WILL BEGIN TO APPLY FOR OUR DISTINCTIVE SIGN WHEN WE HAVE YOUR PAYMENT
CONFIRMED

Print this page, fill it in, SIGN IT and send you for electronic mail: info@padulles.com or for
Fax: 93 454 55 16

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