

State of New Hampshire

Filing Fee: \$10.00
Use black print or type.

Form TM-7
RSA 350-A:6

ASSIGNMENT OF TRADEMARK/SERVICE MARK REGISTRATION

Assignor name: _____

Assignor business address: _____
(no. & street) (city/town) (state) (zip code)

Description of mark: _____

Class No. _____ Registration Date _____ Registration No. _____

Assignee name: _____

Assignee business address: _____
(no. & street) (city/town) (state) (zip code)

Business Mailing Address (if different): _____
(no. & street) (city/town) (state) (zip code)

Business Phone (optional): _____

Business Email (optional): _____

____ Please check if Assignee would prefer to receive the Renewal Notice by email.

Statement: For good and valuable consideration, receipt of which is hereby acknowledged, _____

_____ does hereby assign to _____
(name of assignor) (name of assignee)

all right, title and interest in and to the mark listed above, together with the good will of the business in which the mark is used (or that part of the good will of the business connected with the use of and symbolized by the mark) and the registration thereof.

(Signature of assignor)

(Print or type name)

(Title)

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mailing Address - Corporation Division, NH Dept. of State, 107 N Main St, Rm 204, Concord, NH 03301-4989
Physical Location - State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH